



ANNUAL REPORT

of the

JOINT COMMITTEE ON  
CORRECTIONS

of the

MISSOURI GENERAL ASSEMBLY

January 2013

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To All Senators, Representatives, and Staff:

It is our pleasure to present the Joint Committee on Corrections Annual Report for 2013. This report is provided pursuant to Section 21.465, RSMo.

The Joint Committee on Corrections is a permanent committee of the General Assembly. The committee was established in 1957 by an act of the Sixty-Ninth General Assembly. The applicable statutory provisions may be found in Sections 21.440 to 21.465 of the Revised Statutes of Missouri. The committee is bipartisan in composition and is composed of six members each from the House of Representatives and the Senate.

This report provides detailed information received by the Joint Committee from each of the correctional facilities maintained by the Department of Corrections. We hope you find the Annual Report informative.

# Annual Report of the Joint Committee on Corrections, January 2013

## Introduction

The Joint Committee on Corrections presents information for the following correctional facilities as required by law.

- [Algoa Correctional Center in Jefferson City,](#)
- [Boonville Correctional Center in Boonville,](#)
- [Chillicothe Correctional Center in Chillicothe,](#)
- [Cremer Therapeutic Community Center in Fulton,](#)
- [Crossroads Correctional Center in Cameron,](#)
- [Eastern Reception, Diagnostic, and Correctional Center in Bonne Terre,](#)
- [Farmington Correctional Center in Farmington,](#)
- [Fulton Reception/Diagnostic Center in Fulton,](#)
- [Jefferson City Correctional Center in Jefferson City,](#)
- [Maryville Treatment Center in Maryville,](#)
- [Missouri Eastern Correctional Center in Pacific,](#)
- [Moberly Correctional Center in Moberly,](#)
- [Northeast Correctional Center in Bowling Green,](#)
- [Ozark Correctional Center in Fordland,](#)
- [Potosi Correctional Center in Mineral Point,](#)
- [South Central Correctional Center in Licking,](#)
- [Southeast Correctional Center in Charleston,](#)
- [Tipton Correctional Center in Tipton,](#)
- [Western Missouri Correctional Center in Cameron,](#)
- [Western Reception, Diagnostic, and Correctional Center in St. Joseph,](#) and
- [Women's Eastern Reception, Diagnostic and Correctional Center in Vandalia.](#)

## **Joint Committee on Corrections - 2012**

### **Information for Legislative Institutional Visits**

Facility Name:	ALGOA CORRECTIONAL CENTER			
Custody Level	C-1 C-2		Warden	Scott Lawrence
Total Acreage	340		Address	8501 No More Victims Road, Jefferson City, Mo 65101-4567
Acreage w/in Perimeter	22		Telephone:	573-751-3911
Square Footage	329,360		Fax:	573-526-1385
Year Opened	1932			
Operational Capacity/Count (as of today)	1537/1449			
General Population Beds (capacity and count)	1467/1358		Deputy Warden	William Schmutz
Segregation Beds (capacity and count)	98/91		Deputy Warden	Louisa Bolinger
Treatment Beds (capacity and count)	0		Asst. Warden	Sandra Jimmerson
Work Cadre Beds (capacity count)	N/A		Major	William Vallier
Diagnostic Beds (capacity and count)	N/A			
Protective Custody Beds (capacity and count)	0			

**1. Capital Improvement Needs:**

a) How would you rate the overall condition of the physical plant of the institution?

- **Good. The overall condition of this facility is good.**

b) What capital improvement projects do you foresee at this facility over the next six years?

- **Metal roofs for housing units; over ½ of the roofs have existing major leaks**
- **New Medical/Visiting Building**
- **Sewer/Storm drain project to replace clay tile and manholes**
- **Finish New Sallyport**
- **Pave Cortez Road, perimeter road, parking lots. General overall paving or sealing of parking lots**
- **Motion detector for fence –the system will no longer be supported by the DelNorte Company since it is obsolete.**
- **Install central air and heat on the third floor of all housing units and remove all window units.**

- **Install chiller in the administration building and remove window units**
- **Expand the building automation systems in all areas to allow for more control and improved efficiency.**
- **Install new windows throughout the facility.**

c) How critical do you believe those projects are to the long term sustainability of this facility?

- **Building a new medical unit is critical as the unit is now located on the third floor of a housing unit which is very difficult to transport offenders and/or equipment. It is difficult to access and the space is very limited.**
- **Construction a new sallyport is critical as the current construction poses an unnecessary security risk due to offender foot traffic to and from the recreation area.**
- **The motion detector for the fence is obsolete – service and parts are becoming impossible to obtain. A new system will need to be purchased to maintain perimeter security.**

## 2. Staffing:

a) Do you have any critical staff shortages?

- **Yes, Office Support Assistants - Difficult to attract – Low wages**
- **Yes, Cooks – Due to very low pay**
- **Correction Officers– Additional FTE's would enhance security**

b) What is your average vacancy rate for all staff and for custody staff only?

- **All Staff 4%**
- **All Custody 4%**

**(Calculated by number of vacancies divided by total staff)**

c) Does staff accrual or usage of comp-time by staff affect your management of the institution?

- **Yes, comp time accrual has been cut back due to direction from Central Office. We must operate shifts with less staff.**

d) What is the process for assigning overtime to staff?

- **Volunteers to work overtime are sought first to work overtime, if more staff is needed a mandatory overtime rotation list is utilized to determine whose turn it is to work. This is seldom necessary as staff generally volunteer due to regular comp payments**

e) Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

- **75% of comp time is paid**
- **25% is retained and utilized by staff**

f) Is staff able to utilize accrued comp-time when they choose?

- **As comp pay off for COI/COII – Yes**
- **As comp pay off for other staff – No**
- **As time off – only when posts can adequately be covered**

### 3. **Education Services:**

a) How many (and %) of inmate students at this institution are currently enrolled in school?

- **290 students enrolled in school (20%)**

b) How many (and %) of inmate students earn their GED each year in this institution?

- **110 offenders earn their GED annually**
- **ACC has a GED pass rate of 96.5%**

c) What are some of the problems faced by offenders who enroll in education programs?

- **Many offenders are functionally illiterate (reading level below a 2<sup>nd</sup> grade level)**
- **Students suffer from low self-esteem**
- **Waiting list prevents all students from being enrolled immediately upon arrival at ACC**
- **Unsuccessful in school experience on streets; bad experience with education on streets**
- **Health Issues (Vision problems, mental health medication issues)**
- **Prior drug/alcohol use hampers learning.**

### 4. **Substance Abuse Services:**

a. What substance abuse treatment or education programs does this institution have?

- **AA/NA**

b. How many beds are allocated to those programs?

- **0**

c. How many offenders do those programs serve each year?

- **0**

d. What percent of offenders successfully complete those programs?

- **0**

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?
  - **In our case, budgetary constraints made it very difficult to continue the program. The biggest challenge we faced when running it was the fact that offenders fought placement because it did not count towards their parole stipulations. Offenders felt they were being made to do double work for the same liability.**

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?
  - **Automotive Technology**
  - **Culinary Arts**
  - **Graphic Arts/Web Development**
- b. How many offenders (and %) participate in these programs each year?
  - **Total 240 per year - This represents approximately 16% of the population**
  - **Automotive – 15 Offenders enrolled**
  - **Culinary Arts – 15 Offenders enrolled**
  - **Graphic Arts/Web Development – 12 Offenders are enrolled and three additional offenders are to be enrolled when three additional computers are received.**
  - **Intro to Food Service – 15 offenders will be enrolled as soon as a new teacher is hired.**
- c. Do the programs lead to the award of a certificate?
  - **Yes, each awards a certification in their field**
  - **Automotive offers “Letter of Completion”**
  - **Culinary Arts offers “Letter of Completion”**
  - **Automotive offers a Department of Labor certificate**
  - **Culinary Arts offers a Department of Labor certificate and SERVSAFE certificate from the National Restaurant for Culinary Arts**
  - **Web design offers “Letter of Completion” and Department of Labor certificate.**
- d. Do you offer any training related to computer skills?
  - **Both automotive and culinary arts classes use computers extensively in conjunction with completing the courses.**
  - **The web design class will be hands on computer training**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?
  - **Dry Cleaning and laundry services**
  - **ACC offenders work at CMCC Tire recycling**



- b. How many (and %) of offenders work for MVE at this site?
  - **36 which is 1.5%**
- c. Who are the customers for those products?
  - **State employees – dry cleaning**
  - **DNR – recycling of rubber waste products; University of Missouri at Columbia – tire derived fuel**
  - **Correctional facilities and other state agencies such as MODOT receive recyclable rubber waste products**
- d. What skills are the offenders gaining to help them when released back to the community?
  - **Basic work ethics and disciplined work habits**
  - **Operation of warehouse machinery, ie. Fork lift, tire de-beader, tire de-rimmer and rubber tire loader**
  - **Organizational skills involving office operations-**
  - **Product handling in a warehouse setting**
  - **Maintenance Skills**
  - **Printing and Copying Equipment Operation**

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?
- b. **Yes, re-accreditation in November 2011**
- c. How many offenders are seen in chronic care clinics?
  - **There are currently 894 offenders enrolled in a chronic care clinic**
  - **The medical unit received reaccreditation in 2011**
  - **There are 979 offenders enrolled in 14 chronic care clinics; some offenders are enrolled in more than one clinic.**
- d. What are some examples of common medical conditions seen in the medical unit?
  - **Dental, sports injuries, common illnesses (colds, sinus infections, allergies, etc.)**
  -
- e. What are you doing to provide health education to offenders?
  - **Post pamphlets**
  - **We provide an annual health fair and provide education during the sick call process. We also have various handouts available in the medical unit**
  - **Offer smoking cessation classes**
  - **Counseling sessions with nurses on medical conditions, medications, etc.**

- **Counseling provided by physicians and nurses on medical conditions and medication. There is an offender education board which highlights a different topic each month; ie; handwashing, exercise, rashes, etc.**
- f. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
- **There have been no cases of active TB at ACC in the past year**
- g. Is the aging of the population affecting health care in prisons as it is affecting health care everywhere else? If yes, please explain
- **Yes, we have sicker patients with more chronic illnesses and terminal illnesses that we are taking care of.**

## **8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?
- **Offenders may send Medical Service Requests for mental health services or may be referred by any DOC staff for mental health services. If an offender is determined to have a mental illness which may be specified by the Diagnostic and Statistical Manual of Mental Health Disorders (DSM-IV), he may be enrolled in the Mental Health Chronic Care Clinic. Such offenders are assigned a Mental Health Therapist and a psychiatrist and are seen by a Mental Health professional a minimum of every month.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?
- **There have been no successful suicides at ACC in the past year**
  - **Whenever there is concern that an offender may be suicidal, he is placed on Suicide Watch in a camera cell in the Segregation Unit. The Mental Health Department is notified immediately. A Mental Health professional then assesses the offender to determine his treatment needs. At least one licensed Mental Health professional conducts a face-to-face assessment with an offender before he is removed from suicide watch. Such placements and the subsequent assessments are all done according to IS12-4.1. Additionally, Core Training at ACC includes instruction on suicide prevention and intervention which is required for all institutional staff. In most of these cases, at ACC, the offender is reacting to an environmental or situational problem in which he needs assistance to cope.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?
- Approximately 290 offenders (approximately 19%) take psychotropic medications**

**Note: This number changes because of the transient nature of the population. Additionally, many offenders, who are on psychotropic medications when they transfer to ACC, decide to try to work through their problems without medications. By working with an assigned therapist, they are often able to learn effective coping skills to remain off of medication.**

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?
- **Although not are chronically or mentally ill, approximately 330 offenders, assigned a Mental Health score of three (3) or above, are treated each month by the ACC Mental Health staff.**

**9. What is your greatest challenge in managing this institution?**

- **Recruiting and retaining quality staff**
- **Monetary restraints due to challenging budgetary issues**
- **Core cuts requiring operations of the institution with less staff which may affect security**

**An additional challenge is the ACC work release program. ACC releases approximately 100 offenders to work release and outside clearance daily. A current listing of the work release sites is listed below.**

- **Office of Administration (State Garage)**
- **Office of Facilities Management (Maintenance)**
- **Missouri National Guard**
- **Missouri Department of Transportation (Linn, Meta)**
- **Missouri Governor's Mansion**
- **Missouri Department of Corrections Regional Warehouse**
- **Missouri Department of Corrections General Services Warehouse**
- **Probation & Parole Warehouse**
- **Missouri Vocational Enterprises (Tire Recycling- CMCC)**
- **Jefferson City Parks and Recreation**
- **Missouri Department of Conservation**
- **CMCC Maintenance**
- **JCCC Maintenance, Warehouse and Administration**

**Other challenges are continually dealing with employee shortages/turnover. Our Personnel staff and COI Recruitment hiring staff put a lot of time into screening, hiring and training replacement staff. There is of course an ongoing cause tied to this issue of staff retention.**

**Lastly, managing a facility of this age has its own issues. As mentioned above we are routinely renovating various areas of the Algoa Correctional Center and continue to be in need of renovations to our food service areas, housing unit showers, electrical systems, heating and cooling systems, and our medical unit which is located on the third floor of one of our housing units.**

**10. What is your greatest asset to assist you in managing this institution?**

- **Without a doubt, the greatest asset of ACC is the staff as ACC has a lot of experienced and veteran staff. ACC staff take their jobs seriously and are very proud of their accomplishments and continue to strive to provide excellent service to our offenders and the citizens of Missouri in an effort to maintain public safety. I would also have to add that the ACC staff are professional, courteous and friendly to one another and visitors. They make every attempt at taking this old facility with its character and making it a very comfortable place to work.**

**11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)**

- **See Attachment #1**

**12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer)**

- **The custody staff's morale is fairly high at this point. Regular comp pay outs have significantly improved their job satisfaction and reducing stress. Internal issues are quickly addressed and lines of communication are strived to keep open. Although it seems ACC struggles with a shortage of officers, they realize this is due to turnover and managers do what is possible to minimize impacts. Employee's generally believe time off is granted fairly and supervisors are considerate of their employees needs. The institutional Personnel Club does a great job at arranging annual events such as the Family Day BBQ, Christmas Party, and fund raisers that are enjoyed. Employee recognition is emphasized through Employee of the Month selections, tenure recognition and other awards for excellent service or acts. Work sections enjoy encouraged activities such as "pot luck" lunches, BBQ's, etc. Overall, it seems morale is good and employees demonstrate pride in themselves, their institution and their contribution to public safety**

**13. Caseworkers:**

**A. How many caseworkers are assigned to this institution?**

- **23 total**
- B. Do you currently have any caseworker vacancies?
- **0**
- C. Do the caseworkers accumulate comp-time?
- **Normally No; however, the ICVC coordinator does occasionally on weekends**
- D. Do the caseworkers at this institution work alternative schedules?
- **Two Pathway to Change facilitators occasionally work alternative schedules and that time is flexed out.**
  - **The restorative justice coordinator occasionally comes in on weekend for the restorative justice panels.**
- E. How do inmates gain access to meet with caseworkers?
- **An open door policy provides the opportunity for each offender to speak with their caseworker**
- F. Average caseload size per caseworker?
- **1 caseworker for 82 offenders (average)**
- # of disciplinary hearings per month?
- **386 per month (institutional average)**
- # of IRR's and grievances per month?
- **36 IRR's & 21 Grievances**
- # of transfers written per month?
- **107 (institutional estimate)**
- # of re-classification analysis (RCA's) per month?
- **Total 260 (approximately)**
- G. Are there any services that you believe caseworkers should be providing, but are not providing?
- All required programs are being conducted
- H. If so, what are the barriers that prevent caseworkers from delivering these services?
- N/A
- I. What type of inmate programs/classes are the caseworkers at this institution involved in?
- Inside/Out Dads Program
  - Pathways To Change
  - Impact on Crime Victims Class
  - Assisting Offenders in obtaining Birth Certificates, drivers license and social security cards.
  - Anger Management
  - Work Release
  - Impact of Criminal Thinking
- J. What other duties are assigned to caseworkers at this institution?

- **ACC Caseworkers provide coverage when needed in other sections of the institution (i.e. Library, chapel, custody). They spend the majority of their time facilitating programs, preparing offenders for re-entry and assisting offenders with problems associated with incarceration. They communicate with offender families, attorneys, outside law enforcement agencies, other government agencies and re-entry partners regarding offender issues. They address discipline issues through hearings and complete AICS and RCA's to ensure offenders are housed in a safe environment. They complete TAP's to determine the programs and services that will benefit the offender during/after his incarceration. Caseworkers also conduct institutional audits, serve on task forces, they train various staff and other duties as assigned.**

**14. Institutional Probation and Parole officers:**

- How many parole officers are assigned to this institution?
  - **7**
- Do you currently have any staff shortages?
  - **No**
- Do the parole officers accumulate comp-time?
  - **Yes; must be flexed – no pay**
- Do the parole officers at this institution flex their time, work alternative schedules?
  - **Yes, schedules are flexed when it is necessary due to staff shortages, resignations, etc.**
- How do inmates gain access to meet with parole officers?
  - **Open door is offered 3 days per week – one hour per day and on Wednesday from 3 – 4 work release offenders are seen**
- Average caseload size per parole officer?
  - **250**
 # of pre-parole hearing reports per month?
  - **60**
 # of community placement reports per month?
  - **20**
 # of investigation requests per month?
  - **120**
- Are there any services that you believe parole officers should be providing, but are not providing?
  - **No**
- If so, what are the barriers that prevent officers from delivering these services?
 

**N/A**

I. What type of inmate programs/classes are the parole officers at this institution involved in?

- **Reception & Orientation – The amount of work that is done by the PO limits any flexibility to do more programs. We have work units to justify the PO positions and the work units are much over the normal amount of work. One of our parole officers is assigned to the MRP unit**
- **Three or four officers provide “Anger Management” classes to the offenders.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

**The Missouri Department of Corrections had to endure core cuts in the past year which cost us custody positions. When we are trying to ensure security with less staff, safety may be negatively impacted.**

**As previously stated, staff retention, when you consider the amount of money that goes into the hiring and training of new employees and the ability to retain staff would be more fiscally sound. In my opinion, the committee could assist greatly with the elevation of salaries, not with just correctional officers, but with all sections of the Department of Corrections to attract staff to make a career of the Department of Corrections as opposed to having it become a stepping stone to some other line of similar work.**

16. Does your institution have saturation housing? If so, how many beds?

- **No**

#### **17. Radio/Battery Needs**

:

A. What is the number of radios in working condition?

- **310**

B. Do you have an adequate supply of batteries with a good life expectancy?

- **We are managing; however, conditioning and replacement of batteries continues to be an ongoing issue.**

C. Are the conditioners/rechargers in good working order?

- **Yes**

## **Joint Committee on Corrections**

**Data as of 11-30-12**

### **Information for Legislative Institutional Visits**

Facility Name: <b>Boonville Correctional Center</b>				
Custody Level	<b>3 (BCC) Low (BTC)</b>		Warden	<b>Jay Cassady</b>
Total Acreage	<b>547</b>		Address	<b>1216 East Morgan</b>
Acreage w/in Perimeter	<b>55</b>			<b>Boonville, MO 65233</b>
Square Footage	<b>319,191</b>		Telephone:	<b>660-882-6521</b>
Year Opened	<b>1983</b>		Fax:	<b>660-882-7825</b>
Operational Capacity/Count (as of November 30, 2012)	<b>1316 Capacity 1280 Count</b>			
General Population Beds (capacity and count as of November 30, 2012)	<b>1154 Capacity 1038 Count</b>		Deputy Warden/ Offender Management	<b>Rebecca Ehlers</b>
Segregation Beds (capacity and count as of November 30, 2012)	<b>98 Capacity 89 Count</b>		Deputy Warden/ Operations	<b>Steve Cline</b>
Treatment Beds (capacity and count as of November 30, 2012)	<b>102 (SIP*) Capacity 91 (SIP*) Count 30 (TVP**) Capacity 02 (TVP**) Count 60 (BTC***) Capacity 60 (BTC***) Count</b>		Asst. Warden	<b>Justin Page</b>
Work Cadre Beds (capacity and count as of November 30, 2012)	<b>78 Capacity</b>		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)			Major	<b>Jerry Garnett</b>
Protective Custody Beds (capacity and count as of November 30, 2012)				

**\*Shock Incarceration Program**

**\*\*Technical Violator Program**

**\*\*\*Boonville Treatment Center**

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution? **Good**
- b. What capital improvement projects do you foresee at this facility over the next six years?  
**Food Service renovation, smoke stack demolition, HU-5 roof, Del Norte upgrade, street overlay**
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
**Very important**



## 2. Staffing:

- a. Do you have any critical staff shortages? **Corrections Officer-I**
- b. What is your average vacancy rate for all staff and for custody staff only?  
**Custody = Average of 9 vacancies per month**  
**Non-custody = Average of 6 vacancies per month**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
**Somewhat. We are always mindful that due to training, holidays, deer season, etc. our shifts may run short. Shift commanders use their best judgment when working additional staff on overtime.**
- d. What is the process for assigning overtime to staff? **There are two overtime lists currently utilized; the first is a volunteer list. Officers can volunteer for overtime prior to being mandated. This list is the first to be utilized. The second list is a mandatory overtime list this list is used as a last resort. If no custody staff members volunteer for overtime, the mandatory list is used.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **BCC = 25% paid and 14% used**  
**BTC = 28% paid and 16% used**
- f. Is staff able to utilize accrued comp-time when they choose? **Due to current staffing patterns, custody staff members very rarely have the opportunity to utilize accrued compensatory time when they choose.**

## 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?  
**Approximately 485 offenders are enrolled in the GED education program. That represents approximately 40% of our general population.**
- b. How many (and %) of inmate students earn their GED each year in this institution? **GED certificates are awarded to approximately 180 (12.28%) offenders per year. This includes numbers from BTC.**
- c. What are some of the problems faced by offenders who enroll in education programs? **The problems confronted by offenders are numerous and varied. The most common are:**
  - a) **A lack of motivation because the offenders have not succeeded in the public school system and don't expect that they can succeed in any school, including DOC schools;**
  - b) **General behavior problems due to disrespect of authority. The students are unwilling to take direction from faculty.**
  - c) **Cognitive problems due to substance abuse.**

## 4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?  
**Short-term 120 Court and 84-day parole offenders**
- b. How many beds are allocated to those programs? **60**
- c. How many offenders do those programs serve each year? **180**
- d. What percent of offenders successfully complete those programs? **86%**
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting? **Limited training and requirements for custody to work in a treatment setting.**

## 5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? **N/A**
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. **Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution? **N/A**
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. **Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes.**
- b. How many offenders are seen in chronic care clinics? **532 at present.**
- c. What are some examples of common medical conditions seen in the medical unit? **High blood pressure, diabetes, HIV, Hepatitis, obesity, and cancer.**
- d. What are you doing to provide health education to offenders? **All of the offenders in the chronic care clinics receive education related to their problems, we have an annual health fair where we offer education on multiple topics, and if an offender has a request for a specific topic we attempt to obtain information for them.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? **No.** If so, how did you respond? **N/A**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. **Due to our physical facility and the access to the buildings and stairs, we are limited on what offenders can be housed at this site.**

8. **Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services? **offenders fill out a Medical Services Request and mark the Mental Health box.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **There were no successful suicides in the past year. Suicide prevention is addressed through staff training to recognize signs and symptoms as well as how to respond when notified of suicidal ideations. Offenders who have identified themselves as having suicidal ideations receive regular follow ups to ensure their continued safety.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **There are no offenders (0%) on psychotropic medications at this facility.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **There are no chronically mentally ill offenders at this institution. If an offender is identified as needing psychotropic medications they are moved to a different institution that can meet their needs. All offenders at this institution may access regular counseling services if desired.**

9. What is your greatest challenge in managing this institution? **Our facility is an old institution and the staffing for our custody ranks of Corrections Officer I and Corrections Officer II is shallow.**

10. What is your greatest asset to assist you in managing this institution? **This facility is staffed with numerous veteran staff. The section heads are experienced and have a wealth of knowledge.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **BCC currently has a fleet of older vehicles with high mileage. Our garage supervisor works diligently to keep each vehicle on the road.**

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **Custody staff morale is medium+. Custody supervisors have been redirected to focus on the reduction of mandatory overtime, officer retention, staff recognition, and institutional pride.**
13. **Caseworkers:**
- A. How many caseworkers are assigned to this institution? **BCC = 16    BTC = 1**
  - B. Do you currently have any caseworker vacancies? **1**
  - C. Do the caseworkers accumulate comp-time? **They flex time gained from evening program hours.**
  - D. Do the caseworkers at this institution work alternative schedules? **No.**
  - E. How do inmates gain access to meet with caseworkers? **Open door.**
  - F. Average caseload size per caseworker? **80**
    - # of disciplinary hearings per month? **711**
    - # of IRR's and grievances per month? **IRR = 47    Grievances = 20.66**
    - # of transfers written per month? **80**
    - # of re-classification analysis (RCA's) per month? **149**
  - G. Are there any services that you believe caseworkers should be providing, but are not providing? **No. We provide all the CORE programs at this time.**
  - H. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**
  - I. What type of inmate programs/classes are the caseworkers at this institution involved in? **Pathways to Change, Inside Out Dads, ICVC, Anger Management**
  - J. What other duties are assigned to caseworkers at this institution? **Grievance Officer, RJ/ICVC Coordinator, assist with laundry coverage, assist with library coverage.**
14. **Institutional Probation and Parole officers:**
- A. How many parole officers are assigned to this institution? **10**
  - B. Do you currently have any staff shortages? **No.**
  - C. Do the parole officers accumulate comp-time? **Generally not.**
  - D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes.**
  - E. How do inmates gain access to meet with parole officers? **Walk-in hours and via note to Parole Officer.**
  - F. Average caseload size per parole officer? **150**
    - # of pre-parole hearing reports per month? **65**
    - # of community placement reports per month? **20**
    - # of investigation requests per month? **95**
  - G. Are there any services that you believe parole officers should be providing, but are not providing? **No.**
  - H. If so, what are the barriers that prevent officers from delivering these services? **N/A**
  - I. What type of inmate programs/classes are the parole officers at this institution involved in? **Shock Incarceration, Institutional Treatment, Pathways to Change.**
15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **BCC staff take great pride in providing public safety to the community. All state employees feel at this time pay raises are scarce and staff are continually asked to do more with less.**
16. Does your institution have saturation housing? If so, how many beds? **No**

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? **249**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes.**
- c. Are the conditioners/rechargers in good working order? **Yes.**

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name: <b>Chillicothe Correctional Center</b>				
Custody Level	<b>Minimum/Maximum</b>		Warden	<b>Steve Larkins</b>
Total Acreage	<b>140</b>		Address	<b>3151 Litton Road</b>
Acreage w/in Perimeter	<b>60</b>			<b>Chillicothe, MO 64601</b>
Square Footage	<b>450,000</b>		Telephone:	<b>660-646-4032</b>
Year Opened	<b>2008</b>		Fax:	<b>660-646-1217</b>
Operational Capacity/Count (as of November 30, 2012)	<b>1164 (*1240) Capacity 1103 Count</b>			
General Population Beds (capacity and count as of November 30, 2012)	<b>908 Capacity 860 Count</b>		Deputy Warden	<b>Steve Moore Deputy Warden of Offender Management</b>
Segregation Beds (capacity and count as of November 30, 2012)	<b>*76 Capacity 45 Count</b>		Deputy Warden	<b>Sherie Korneman Deputy Warden of Operations</b>
Treatment Beds (capacity and count as of November 30, 2012)	<b>256 Capacity 198 Count</b>		Asst. Warden	<b>David Barnett Assistant Warden</b>
Work Cadre Beds (capacity and count as of November 30, 2012)	<b>0/0 (Included in General Population Beds)</b>		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	<b>200 Capacity 0 Count</b>		Major	<b>Courtney Schweder</b>
Protective Custody Beds (capacity and count as of November 30, 2012)	<b>0/0 (Included in Segregation Beds)</b>			
<b>*76 Ad Seg beds not currently in our operational capacity count</b>				

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?  
**The overall condition of the facility is good.**
- b. What capital improvement projects do you foresee at this facility over the next six years?  
**Convert perimeter and wall pack lighting over to LED lighting to conserve energy and reduce our environmental footprint. Concrete repair to the rear sally port and rear access road. Replacement of food service tile floor to an epoxy flooring. Install a waterless fire system in the main data security room.**
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
**The only critical project that we foresee would be the waterless fire protection system for the main data security room, as it has a water system in place at this time. If this system is discharged it could destroy all of our critical electronic security and data system components for the entire facility. The other projects will be general capital improvements.**

2. **Staffing:**

- a. Do you have any critical staff shortages?  
**No**
- b. What is your average vacancy rate for all staff and for custody staff only?
- **Average vacancy rate for all staff (January 1, 2012 through October 31, 2012):**  
**Average total vacancies per month = 13.9**  
**Average number of positions vacated per month = 3.4**
  - **Average vacancy rate for custody staff (January 1, 2012 through October 31, 2012):**  
**Average total vacancies per month = 3.3**  
**Average number of positions vacated per month = 2.2**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
**There is no significant impact on management of the facility.**
- d. What is the process for assigning overtime to staff?  
**Volunteers are solicited to cover overtime needs. If no volunteers are found, staff are mandated to cover necessary overtime.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?
- **Percentage of comp time taken off – 53%**
  - **Percentage of comp time paid off – 47%**
- f. Is staff able to utilize accrued comp-time when they choose?  
**Every effort is made for staff to take the time the same work week as it is earned if they want. In this way, those individuals particularly who earn time and a half if it carries over into the week, are only taking actual time worked.**

3. **Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?

Gross E2-E5	Available & Eligible E2-E5	Enrollment in School	Seats Available	Enrollment as % of Available & Eligible	Enrollment as % of Seats Available
288	260	179	225	58%	80%

- b. How many (and %) of inmate students earn their GED each year in this institution?

Fiscal Year	Passed GED	Attempted GED	CCC Pass Rate
2009	69	86	80%
2010	104	124	84%
2011	98	116	85%
2012	87	97	90%
TOTAL	358	423	85%

- c. What are some of the problems faced by offenders who enroll in education programs?  
**Most adults who didn't graduate high school never learned good study habits, never felt motivated to learn, and never did well in a traditional classroom environment. The offender student does not escape this statistic.**

#### 4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?

**Chillicothe Correctional Center began offering Substance Abuse Treatment services on October 1, 2009 contracted through Kansas City Community Center. On July 1, 2012 a new company was awarded the contract to provide Substance Abuse Treatment services – Gateway Foundation. CCC offers the following treatment services: Assessment Services, Short Term Treatment Program, Intermediate Treatment Program, Long Term Treatment Program, Partial Day Treatment Program, and Relapse Program.**

**The contractor provides on site assessments, as well as a gender responsive, evidence-based substance abuse treatment to those offenders referred by the Department/court system and designated eligible to receive services. Additionally, a small number of offenders are allowed to volunteer to participate within specific programs. The following is a summary of services:**

- **Assessment services for offenders at CCC who have been screened for possible treatment needs or are court ordered for institutional substance abuse treatment.**
  - **Short Term Treatment Program (12 weeks) for offenders sentenced pursuant to Section 559.115 RSMo, Post Conviction Drug Treatment for offenders sentenced pursuant to Section 217.785 RSMo, and probation and parole violators stipulated for substance abuse treatment by the Board of Probation and Parole.**
  - **Intermediate Treatment Program (6 months) for offenders stipulated by the Board of Probation and Parole for substance abuse treatment.**
  - **Long Term Treatment Program (12 up to 24 months) for offenders ordered by the court pursuant to Section 217.362 RSMo, and/or ordered by the Court pursuant to Section 577.023 RSMo for substance abuse treatment.**
  - **Long Term Treatment Program (12 months) for offenders stipulated by the Board of Probation and Parole for substance abuse treatment.**
  - **Partial Day Treatment Program (10 weeks) for offenders referred by the Department for substance abuse treatment services. Offenders may also self refer to participate within the Partial Day Treatment Program upon meeting designated criteria.**
  - **Relapse Program (30 days) for eligible offenders who have previously completed treatment and are referred by the Department. Offenders may also self refer to participate within the Relapse Program upon meeting designated criteria.**
- b. How many beds are allocated to those programs?
- **A total of sixty-four (64) beds are contractually allocated for Short Term Treatment Program.**
  - **A total of sixty-four (64) beds are contractually allocated for the Intermediate Treatment Program.**
  - **A total of sixty-four (64) beds are contractually allocated for the Long Term Treatment Program.**
  - **A total of thirty-two (32) beds are contractually allocated for the Partial Day Treatment Program.**
  - **A total of thirty-two (32) beds are contractually allocated for the Relapse Program.**
  - **However, due to an agreement between the contractor and the Department, currently there are ninety-six (96) beds for the Intermediate Program and thirty-two (32) beds for the Long Term Program.**

- c. How many offenders do those programs serve each year?

**The programs have the capacity to serve the following number of offenders per year:**

- **A total of two hundred fifty-six (256) offenders can complete the Short Term Program. There were two hundred forty-two (242) offenders that participated in the last fiscal year.**
  - **A total of one hundred ninety-two (192) offenders can complete the Intermediate Treatment Program. There were one hundred ninety-five (195) offenders that participated in the last fiscal year.**
  - **A total of thirty-two (32) offenders can complete the Long Term Treatment Program. There were thirty-eight (38) offenders that participated in the last fiscal year.**
  - **A total of one hundred sixty (160) offenders can complete the Partial Day Treatment Program. However, there were only ninety-one (91) offenders that participated in the last fiscal year.**
  - **A total of three hundred eighty-four (384) offenders can complete the Relapse Program. However, there were only eighteen (18) offenders that participated in the last fiscal year.**
- d. What percent of offenders successfully complete those programs?
- **Short Term Treatment Program      90%**
  - **Intermediate Treatment Program      85%**
  - **Long Term Treatment Program      45%; 32% of the offenders  
withdrew from the program**
  - **Partial Day Treatment Program      93%**
  - **Relapse Program                      100%**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

**The women's population brings a separate set of concerns that the male offender population does not. Research indicates the need for gender responsive programming, which requires needs be met that are not addressed in traditional treatment programs. Some additional areas that must be addressed include poor health, risk of sexually transmitted diseases, psychological problems, a history of victimization/trauma, family responsibility, and lack of employment skills. There is the additional concern of the balance of security with the need to provide treatment. Correctional staff is trained primarily to ensure safety and security within our facilities, while treatment staff views incarceration as a time for rehabilitation. Continuous training and redirection is needed to balance these two philosophies. One final challenge in running a treatment program in a prison setting is finding adequately qualified staff in a rural location. This requires frequent advertising to discover potential employees.**

## **5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?

**We currently have six vocational programs offered at CCC. They include Basic Electricity and Electronics, Business and Customer Service, Computer Repair and Refurbishing, Cosmetology, Culinary Arts, and Professional Gardening and Landscaping. There is currently a move to change the Computer Repair class to a Web Design class. This change should occur sometime at the beginning of 2013.**



- b. How many offenders (and %) participate in these programs each year?  
**During FY12 CTE saw a total of 336 students enrolled in classes with 77% completion rate. For FY13 CTE currently is showing 159 students enrolled with a completion rate of 77%.**
- c. Do the programs lead to the award of a certificate?  
**Each graduate from the programs receives a Department of Labor Certification which corresponds to the particular area of study. For example, an individual who graduates from Computer Repair and Refurbishing receives a DOL certificate for a Computer Operator. In addition, a certificate/letter from the Department of Offender Rehabilitation is also earned for all graduates. Lastly, in three of our current classes we have three Professional Certificates or licenses earned. In Cosmetology graduates can earn a license to practice Cosmetology in the State of Missouri if they pass a practical and a theorem exam. In Culinary Arts a professional ServSafe certificate can be earned through an exam proctored by our own staff member. In Business and Customer Service students can earn at least one Microsoft Office certification through testing. These certificates can be in any area of Microsoft Office and are recognized worldwide.**
- d. Do you offer any training related to computer skills?  
**CTE does offer training related to computer skills. The classes which are based upon computer skills references are Computer Repair and Refurbishing, Business and Customer Service, and will also include the Web Design class which will utilize Adobe's Creative Suite software. This software is cutting edge software within the Graphic Design profession. All CTE classes have elements of computer usage throughout.**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?  
**Men's boxers, women's briefs, washcloths and towels.**
- b. How many (and %) of offenders work for MVE at this site?  
**30 offenders (2.9%)**
- c. Who are the customers for those products?  
**DAI is the primary customer; they issue these items to the offenders, and items are available for offenders to purchase through the offender canteen if they wish to have additional items.**
- d. What skills are the offenders gaining to help them when released back to the community?  
**Offenders learn how to sew, work well with others and work as part of a team to accomplish quality products. Some offenders will also learn leadership, clerical and mechanical skills. Additionally, all offenders have the opportunity to learn some basic fork lifting skills and enroll in Public Broadcast System (PBS) classes "Work Place Essential Skills" and "Computer Literacy" and "Mavis Beacon Teaches Typing".**

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?  
**Yes**
- b. How many offenders are seen in chronic care clinics?  
**862**
- c. What are some examples of common medical conditions seen in the medical unit?  
**Diabetes, Hypertension, Asthma, COPD, Seizures, Hepatitis C, HIV, Cardiovascular, Cancer.**

- d. What are you doing to provide health education to offenders?  
**Annual Health Fair, written and verbal education during chronic care and sick call. Information posted to offender TV channel periodically.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?  
**No**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.  
**Yes, as aging occurs health naturally declines, especially for those with chronic conditions.**

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?  
**Most of the mental health services can be categorized into six main groups. They are Chronic Care, Individual Encounters, Groups, Administrative Segregation, Crisis intervention and Suicide intervention. As Chronic Care and Suicide intervention will be discussed in greater detail later in this document, these two items will be excluded in the response to this current question.**

**Offenders may request an Individual Encounter with Mental Health by submitting a Medical Services Request (MSR). After Mental Health receives an MSR from an offender, a response letter is generated to notify the offender that Mental Health has received their request. The appropriate mental health staff member will then schedule an appointment with the offender to address their concern. Staff referrals are an additional source that generates Individual Encounters. Staff referrals are handled in a manner similar to that of MSR.**

**Groups are advertised with sign-up sheets that are placed on bulletin boards within the General Population housing units. Offenders are able to request participation in mental health groups by signing their names on the sign-up sheets. The Mental Health department will also accept requests for groups by way of MSR submitted by the offender. The group facilitator will make use of the sign-up sheets, MSR, and staff referrals in order to fill the offered group.**

**A Qualified Mental Health Provider (QMHP) will attempt to make weekly contact with all offenders who are housed in the Administrative Segregation Unit. Currently mental health staff are working with Administrative Segregation staff to establish a transition process to help offenders who have difficulty adjusting to general population after being released from Administrative Segregation.**

**The Mental Health department will accept requests from any Department of Corrections staff member for crisis intervention. After receiving a request for crisis intervention a Qualified Mental Health Provider will meet with the offender as soon as possible.**

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?  
**There have been no successful suicides at Chillicothe Correctional Center in 2012. Offenders on suicide watch are monitored by custody staff at fifteen-minute intervals, as well as by cameras located in these cells.**

**A Crisis Treatment Plan is generated by mental health staff that details the goals and objectives that a client must meet to demonstrate improved stability and suitability for release from suicide watch. Mental health staff meet with these offenders on a daily basis to monitor for improved stability. Most offenders are released in under seventy-two hours; however, they may remain on this status for additional time if needed. Only the Institutional Chief of Mental Health Services, Staff Psychologist, or a Qualified Mental Health Professional who is operating as Acting ICMHS are authorized to remove an offender from suicide watch status.**

**All DOC staff members are trained to recognize verbal and behavioral cues that indicate potential suicide. This instruction is provided to the staff during initial training with DOC and every other year thereafter. Currently, the Institutional Chief of Mental Health Services is providing the biennial training for staff at the Chillicothe Correctional Center.**

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

**As of November 1, 2012 there were 377 offenders receiving psychotropic medications which was approximately 34.27% of Chillicothe's offender population at that time.**

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

**As of November 1, 2012 there were 412 offenders on camp who are considered to have a moderate level of mental health treatment needs and 5 who are considered to have serious functional impairment due to a Mental Disorder. Of the total 417 offenders, there are 3 who currently have an involuntary medication order in place. All 417 offenders meet with a qualified mental health professional at minimum once every month. Additional therapy sessions are scheduled in response to MSRs submitted by offenders and staff referrals.**

**Those who are receiving psychotropic medication meet with a psychiatrist at minimum every ninety days. Some psychiatric appointments are provided more frequently depending on the individual needs of the offender. In addition, those who are taking medications meet with a psychiatric nurse on a regular basis to monitor any effects that the medications could have on the offender. Those who receive involuntary medication meet with a psychiatrist every fourteen days.**

**Offenders who are dealing with chronic or serious mental illness are given priority for participation in mental health groups.**

9. What is your greatest challenge in managing this institution?

**Continuing to provide an atmosphere for staff which fosters professionalism, motivation and excellence.**

10. What is your greatest asset to assist you in managing this institution?

**Quality staff.**

11. What is the condition of the facility's vehicle fleet? (mileage, old vehicles etc?)

Vehicle License	Year	Make	Model	Designation	Mileage	Condition
13-0006M	2009	Ford	Crown Victoria	Perimeter Vehicle	59,949	Fair
13-0520M	2009	Ford	Crown Victoria	Perimeter Vehicle	55,826	Fair
13-0964M	2009	Ford	Crown Victoria	Offender Transportation	76,209	Good
13-0965M	2009	Ford	Crown Victoria	Offender Transportation	53,934	Good
13-0966M	2009	Ford	Crown Victoria	Offender Transportation	50,389	Good
13-0967M	2009	Ford	Crown Victoria	Offender Transportation	46,301	Good
13-0968M	2009	Ford	Crown Victoria	Offender Transportation	49,830	Good
32-0282M	2008	Chevrolet	Uplander Mini Van	Offender Transportation	80,942	Good
32-0285M	2008	Chevrolet	Uplander Mini Van	Offender Transportation	66,223	Good
13-0138M	2009	Ford	Van/15 Passenger	Offender Transportation	37,987	Good
13-0969M	2009	Ford	Van/15 Passenger	Offender Transportation	46,269	Good
13-0970M	2009	Ford	Van/15 Passenger	Offender Transportation	47,288	Good
13-0971M	2009	Ford	Van/15 Passenger	Offender Transportation	37,700	Good
13-0972M	2009	Ford	Van/15 Passenger	Offender Transportation	36,799	Good
13-0973M	2009	Ford	Van/15 Passenger	Handicap Offender Transportation	20,461	Good
13-0174M	2009	Ford	Van/12 Passenger	Offender Transportation	31,937	Good
13-0363M	2009	Ford	Van/12 Passenger	Offender Transportation	35,066	Good
13-0419M	2009	Ford	Van/12 Passenger	Offender Transportation	27,663	Good
13-0139M	2009	Chevrolet	Impala	Pool Vehicle/On Loan to CRCC	51,123	Good
13-0297M	2009	Chevrolet	Impala	Pool Vehicle	53,961	Good
13-0974M	2009	Chevrolet	Equinox	Pool Vehicle	44,373	Excellent
13-0976M	2009	Chevrolet	Impala	Pool Vehicle	43,303	Good
13-0977M	2009	Chevrolet	Impala	Pool Vehicle/On Loan to CRCC	49,892	Good
13-0978M	2009	Chevrolet	Impala	Pool Vehicle	45,190	Good
13-0975M	2009	Ford	F-250	Maintenance	8,310	Excellent
13-0979M	2009	Chevrolet	1 Ton Truck Silverado 4x4	Maintenance	2,148	Excellent
13-0980M	2010	Ford	F-350/Box Truck	Maintenance/Custody	4,976	Excellent

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer)

**Morale level of custody staff remains medium. There is satisfaction with the work environment, but with no significant pay raise for several years and numerous increases in healthcare costs, staff feel they are underpaid.**

13. Caseworkers:

- How many caseworkers are assigned to this institution?  
**21 Corrections Case Managers and 3 Corrections Classification Assistants**
- Do you currently have any caseworker vacancies?  
**No**
- Do the caseworkers accumulate comp-time?  
**No**
- Do the caseworkers at this institution work alternative schedules?  
**Yes**
- How do inmates gain access to meet with caseworkers?  
**Caseworkers have open door hours from 8:30 a.m. to 4:30 p.m. Monday through Friday. Caseworker staff are available in units in the afternoon until 4:30 p.m.**
- Average caseload size per caseworker?  
**Currently, the average caseload is 56 offenders per caseworker.**
  - # of disciplinary hearings per month?  
**347 per month**

- # of IRR's and grievances per month?

**56 IRR's per month and 11 grievances per month**

- # of transfers written per month?

**10.6 transfers per month out of the institution**

- # of re-classification analysis (RCA's) per month?

**169.8 RCA's per month**

- g. Are there any services that you believe caseworkers should be providing, but are not providing?

**No**

- h. If so, what are the barriers that prevent caseworkers from delivering these services?

**N/A**

- i. What type of inmate programs/classes are the caseworkers at this institution involved in?

- **Pathway to Change**
- **Anger Management**
- **Impact of Crime on Victims (ICVC)**
- **Second Chance in Action**
- **Catholic Charities**
- **Green Hills Empowerment**
- **Pre-Release Program**
- **Resource Library**

- j. What other duties are assigned to caseworkers at this institution?

**Caseworkers are often called upon to provide assistance to other areas. They act as Visiting Room Liaison, assist with the Puppies for Parole Program, assist with Video Court and conduct video conferences for re-entry purposes.**

#### **14. Institutional Probation and Parole officers:**

- a. How many parole officers are assigned to this institution?

**Currently there is one District Administrator and six allotted Institutional Parole Officers; we are currently fully staffed.**

- b. Do you currently have any staff shortages?

**Not at this time.**

- c. Do the parole officers accumulate comp-time?

**Only if required to attend training or some type of program away from the institution. In the event comp time is accumulated, we work diligently to flex the time off the week it is earned.**

- d. Do the parole officers at this institution flex their time, work alternative schedules?

**The only event of flex time is when comp time is earned, as stated above. All Institutional Parole Officers work five, eight-hour days currently.**

- e. How do inmates gain access to meet with parole officers?

**Inmates gain access to the parole officers by written kites and/or attending open door.**

- f. Average caseload size per parole officer?

**Caseload size per officer ranges from 100-150, but can be all offenders on one housing unit, depending on the officer's assignment. Currently, two IPOs handle one housing unit each, on their own.**

- # of pre-parole hearing reports per month?

**55**

- # of community placement reports per month?

**15**

- # of investigation requests per month?

**84**

- g. Are there any services that you believe parole officers should be providing, but are not providing?

**No, other than Diagnostic Services; this cannot happen until the R&D Unit opens.**

- h. If so, what are the barriers that prevent officers from delivering these services?

**The Reception and Diagnostic Center has not yet opened.**

- i. What type of inmate programs/classes are the parole officers at this institution involved in?

**At this time the parole officers are involved in the orientation classes for new general population offenders to CCC, and new treatment offenders to CCC. At these orientations, the participating offenders are advised on general probation and parole questions, including but not limited to information regarding scheduling of parole hearings, meeting with institutional parole officers, jail time credit to their sentence, and the role of the Parole Board in the decision making process. In addition to the orientation group, the IPOs are involved in the pre-release group held each month. Specifics of the requirements of supervision on parole and conditional release are discussed in detail.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

**None**

16. Does your institution have saturation housing? If so, how many beds?

**No**

17. **Radio/Battery Needs:**

- a. What is the number of radios in working condition?

**496**

- b. Do you have an adequate supply of batteries with a good life expectancy?

**Yes**

- c. Are the conditioners/rechargers in good working order?

**Yes**

## **Joint Committee on Corrections - 2012**

### **Information for Legislative Institutional Visits**

Facility Name: Cremer Therapeutic Community Center			
Custody Level	Low	Warden	Cindy Steuber
Total Acreage	8	Address	689 Highway O
Acreage w/in Perimeter	1		Fulton, MO. 65251
Square Footage	Institution 42,256 Laboratory 2,200	Telephone:	573-592-4013
Year Opened	1994	Fax:	573-592-4019
Operational Capacity/Count (as of November 30, 2012)	180 / 180		
General Population Beds (capacity and count as of November 30, 2012)	N/A	Deputy Warden	N/A
Segregation Beds (capacity and count as of November 30, 2012)	4 / 2	Deputy Warden	N/A
Treatment Beds (capacity and count as of November 30, 2012)	180 / 180	Asst. Warden	Kim Crouch
Work Cadre Beds (capacity and count as of November 30, 2012)	N/A	Substance Abuse Unit Supervisor	Lisa Hayes
Diagnostic Beds (capacity and count as of November 30, 2012)	N/A	Chief of Custody	Captain Dave Topash
Protective Custody Beds (capacity and count as of November 30, 2012)	N/A		

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution? **Fair to good.**
- b. What capital improvement projects do you foresee at this facility over the next six years? **Heating cooling system needs updated, some Interior walls need repaired. One shower is in need of upgrade.**
- c. How critical do you believe those projects are to the long-term sustainability of this facility? **In order to keep the facility safe, sanitary, and physically sound, these upgrades are very important.**

#### **2. Staffing:**

- a. Do you have any critical staff shortages? **Evening shift has had several staff out on extended leave for FMLA and other various reasons and had to temporarily assign some day shift officers to the evening shift to ensure minimum staffing and we have had overtime as a result. Substance Abuse Counselor I.**
- b. What is your average vacancy rate for all staff and for custody staff only? **All Staff - 4% Custody – 4%**

- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? Yes, We have had to operate evening shift at minimal staffing levels for a while to ensure overtime is taken off, training requirements are met, etc.
- d. What is the process for assigning overtime to staff? The shift supervisor selects volunteers from the "volunteer list" which officers sign to work the overtime. If there are no volunteers on the list, the shift supervisor asks each officer, in order of seniority, if they wish to work the overtime. If still no volunteers are found, then the mandatory list is utilized. The list contains all officers on the shift. The officer listed on the top of the list, if on duty, is required to stay and work the overtime. If the person on the top of the list is not on duty, then the second person is utilized, and so on. Once an officer has worked the overtime (minimum of 1 hour), they are moved to the bottom of the list and everyone else is moved up.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? 10% is paid 90% time off
- f. Is staff able to utilize accrued comp-time when they choose? Yes, as long as scheduling allows.

### 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? 65 offenders (36%) The rest have verified High School Diplomas or GED's.
- a. How many (and %) of inmate students earn their GED each year in this institution? In FY12, of 69 offenders at CTCC that took the GED test, 66 of them passed (96%).
- a. What are some of the problems faced by offenders who enroll in education programs? Mainly, a need for more one on one attention than what can be provided. Some have special needs; however, every attempt is made by staff to accommodate those needs.

### 4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? We serve as a short term treatment program, 3 months in length.
- b. How many beds are allocated to those programs? 180
- c. How many offenders do those programs serve each year? Approximately 720
- d. What percent of offenders successfully complete those programs? For FY12 84%
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting? Due to so many budget cuts it has become very difficult to provide adequate training to treatment staff.

### 5. Vocational Programs: N/A

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

### 6. Missouri Vocational Enterprises: N/A

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?



## 7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? Yes, CTCC was accredited by NCCCHC in 2005. CTCC was reaccredited in 2008 and again in 2011.
- b. How many offenders are seen in chronic care clinics? 349 offenders were seen by physician and 344 were seen by a nurse for chronic care visits in the fiscal year 2011-2012. Many are seen in addition to their scheduled chronic care visit for follow up appointments specific to their need.
- c. What are some examples of common medical conditions seen in the medical unit? Hypertension, rashes, chronic pain, back pain/problems, headaches, allergy problems, constipation, and athlete's foot/jock itch.
- d. What are you doing to provide health education to offenders? Orientation and access to care education is provided upon arrival to CTCC. During each offenders first full week at CTCC, they attend a health fair for one hour where informational handouts are offered and the following topics are discussed: Access to medical care at CTCC, sexually transmitted diseases, HIV and AIDS, hazards of smoking, facts and benefits of smoking cessation, athlete's foot, dental care and hygiene, Hep C, TB and MRSA. The offenders are given opportunity to ask questions and time for discussion. Offenders are encouraged to come to medical for personal questions and concerns.

Education continues to be provided at clinical encounters. Offenders receive verbal instruction during nurse and physician sick call; handouts are readily available with specific education through nurse sick call. In addition, education specific to chronic diseases is given through chronic care clinics. Pre- and Post-test counseling is also given to offenders receiving HIV (exit, mandatory or voluntary) and Hep C lab tests.

- b. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? No
- c. Is the aging of the population affecting health care in prisons as it is affecting health care everywhere else? If yes, please explain Yes. We are seeing an older population of offenders. It is making an impact on our healthcare system by requiring more nursing and doctor visits, more involved and intensive care and more medication. It also affects our outcounts to specialists. We are finding our population in general has more health concerns.

## 8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? By making a request on an MSR (Medical Service Request) form. Staff can also refer offenders to mental health services based on their observations.
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? No successful suicides or suicide attempts. Prevention includes educating staff through training and written material as well as educating offenders about suicide warning signs while in Orientation class during their first week.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? None (0%).
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? In order to qualify to be assigned to CTCC, offenders must be a Mental Health score of 1 or 2, meaning none of them are chronically or seriously mentally ill.

9. What is your greatest challenge in managing this institution? As an institutional treatment center it is imperative that staff receive current training in the area of substance abuse. Budgetary constraints have prevented us from assisting staff with necessary training required by these specialized positions.
10. What is your greatest asset to assist you in managing this institution? Having an administrative team of staff who are dedicated to the mission of our facility.
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

We have:

1994 Dodge 15 passenger van with 87,281 miles  
 2003 Ford 15 passenger van with 153,248 miles  
 2000 Chevy Impala car with 107,160 miles (our only pool vehicle)  
 2001 Ford Crown Vic with 128,039 miles  
 2002 Ford Crown Vic with 111,247 miles

The 1994 Dodge Van has a lot of rust patches on it.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)** Average. Time off is fairly easy to come by and overtime is low. Moral lower than in the past due to more staff shortages this year.
13. **Caseworkers:**
  - A. How many caseworkers are assigned to this institution? 1
  - B. Do you currently have any caseworker vacancies? No
  - C. Do the caseworkers accumulate comp-time? Very rarely, if ever. The workload of the position itself normally does not require the person to work outside of core work hours.
  - D. Do the caseworkers at this institution work alternative schedules? No
  - E. How do inmates gain access to meet with caseworkers? Utilizing the "open door" schedule, or by writing a note with their request.
  - F. Average caseload size per caseworker? 180
    - # of disciplinary hearings per month? 49
    - # of IRR's and grievances per month? IRR's 1.08 (13 total for FY12) Grievances .08 (1 total for FY12)
    - # of transfers written per month? 0 (transfers at this facility are not handled by the CCW)
    - # of re-classification analysis (RCA's) per month? 0 (Offenders in an ITC do not receive ICA/RCA's)
  - G. Are there any services that you believe caseworkers should be providing, but are not providing? No
  - H. If so, what are the barriers that prevent caseworkers from delivering these services? N/A
  - I. What type of inmate programs/classes are the caseworkers at this institution involved in? Impact of Crime on Victims classes (the full curriculum is not utilized, but individual lessons are presented by the CCW and/or IAC), Re-entry class on interviewing techniques and resume writing/job applications.
  - J. What other duties are assigned to caseworkers at this institution? Grievances, guilty plea/legal forms, indigence, account balance transfers, unofficial letters of

incarceration, notary, visiting liaison, disciplinary hearings, intake processing, restorative justice activities. Due to this facility housing short term ITC offenders and utilizing Substance Abuse Counselors as case managers, the caseworker here does not complete TAP's or RCA's.

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? 3
- B. Do you currently have any staff shortages? No
- C. Do the parole officers accumulate comp-time? No, if comp time is earned, they must flex it within the week it is earned.
- D. Do the parole officers at this institution flex their time, work alternative schedules? Yes / Yes
- E. How do inmates gain access to meet with parole officers? The parole officer calls them out for an interview at the time their court report is being written. If an offender has a question they can write it down or send a note to the parole officer asking to be seen. The parole officers provide 1 hour during Orientation when offenders can ask questions, and are on the wings one hour a week providing a reentry class during which questions can be asked.
- F. Average caseload size per parole officer? 60 Offenders
  - # of pre-parole hearing reports per month? None, however, based on our population CTCC utilizes court reports, and there was an average of 58 court reports completed per month in FY12.
  - # of community placement reports per month? N/A
  - # of investigation requests per month? 23 per month in FY12
- G. Are there any services that you believe parole officers should be providing, but are not providing? No. The officers provide reentry classes and orientation classes on a weekly basis. In order to ensure proper maintenance of their caseloads, including contacts with courts, Parole Board and offender family members, their time is limited.
- H. If so, what are the barriers that prevent officers from delivering these services? N/A
- I. What type of inmate programs/classes are the parole officers at this institution involved in? One hour during new offender Orientation per week, and one hour of reentry class per week, that provides an in depth explanation of each probation/parole stipulation. This year IPO's screened CTCC offenders for the Families and Offenders Reunited (FOR) program that is available in St. Louis.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. Nothing at this time.

16. Does your institution have saturation housing? If so, how many beds? No

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? 45 (All New)
- b. Do you have an adequate supply of batteries with a good life expectancy? Yes (All New)
- c. Are the conditioners/rechargers in good working order? Yes (All New)

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name: Crossroads Correctional Center				
Custody Level	C-5 (Maximum)		Warden	Larry Denney
Total Acreage	48 acres		Address	1115 E. Pence Rd.
Acreage w/in Perimeter	40 acres			Cameron, MO. 64429
Square Footage	580,800 sq. ft.		Telephone:	(816) 632-2727
Year Opened	1997		Fax:	(816) 632-2754
Operational Capacity/Count (as of November 30, 2012)	Capacity-1470 Count-1470			
General Population Beds (capacity and count as of November 30, 2012)	Capacity-1152 Count-1145		Deputy Warden	Darin Morgan
Segregation Beds (capacity and count as of November 30, 2012)	Capacity-273 Count-253		Deputy Warden	Chris McBee
Treatment Beds (capacity and count as of November 30, 2012)	N/A		Asst. Warden	Terry Page
Work Cadre Beds (capacity and count as of November 30, 2012)	N/A		Asst. Warden	N/A
Diagnostic Beds (capacity and count as of November 30, 2012)	N/A		Major	Lauretta Aitkens
Protective Custody Beds (capacity and count as of November 30, 2012)	Capacity-72 Count-72			

#### **1. Capital Improvement Needs:**

a. How would you rate the overall condition of the physical plant of the institution?

**Response: The overall condition of the institution is still good. There are some areas of concern needing replacement/repair/upgrade.**

b. What capital improvement projects do you foresee at this facility over the next six years?

**Response: The following capital improvement projects are needed at CRCC:**

- Lagoon needs dredged and cover replaced;
- Cooling towers need replacement due to oxidation;
- Repair and upgrade is needed to current security camera system;
- Parking lot needs to be re-asphalted;
- Fire alarm system circuit boards need to be upgraded due to becoming obsolete;
- Security windows need replacement in various areas within the institution;
- Outer doors through Central Services need replacement due to oxidation; and
- Current swipe card/security system needs to be upgraded due to becoming obsolete.

c. How critical do you believe those projects are to the long-term sustainability of this facility?

**Response: We believe these projects to be crucial to the security of the institution to provide a safe, healthy and secure environment.**

2. **Staffing:**

a. Do you have any critical staff shortages?

**Response:** Not at present.

b. What is your average vacancy rate for all staff and for custody staff only?

**Response:** Our average vacancy rate for custody staff is 15.14% for 2012; the vacancy rate for non-custody staff is 10.58%. The average overall vacancy rate for all staff is 13.9% for 2012.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

**Response:** No, first and foremost we ensure safety and security needs of the institution are met to ensure the maximum results in regards to public safety. We are always aware and attentive to staff scheduling and/or requests to utilize comp time in an effort to ensure comp time balances are maintained at minimum levels.

d. What is the process for assigning overtime to staff?

**Response:** In accordance with Departmental Policy and Standard Operating Procedures for D2-8.11 Work Schedules, a compensatory time notification system has been developed, utilizing a mandatory and voluntary overtime list. When there is a need to request staff to work additional hours to provide shift coverage, a request for volunteers is made first. If volunteers are not available, the mandatory list will be utilized to provide shift coverage in the order of seniority (beginning with the most recent hire).

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

**Response:** The approximate percentage of compensatory time utilized as time off by staff is 80% and for compensatory time paid is 20%.

f. Is staff able to utilize accrued comp-time when they choose?

**Response:** We make every attempt to give staff time off when requested dependent upon our current vacancies; however, at times this is not possible, i.e. major holidays, deer season, etc.

3. **Education Services:**

a. How many (and %) of inmate students at this institution are currently enrolled in school?

**Response:** Crossroads Correctional Center has a volunteer-facilitated GED program, with 15 offenders (1.02%) currently enrolled.

b. How many (and %) of inmate students earn their GED each year in this institution?

**Response:** CRCC has a volunteer-facilitated GED program. A total of 6 offenders (.04%) earned their GED in 2012.

c. What are some of the problems faced by offenders who enroll in education programs?

**Response:** Volunteers facilitating this program report it is a challenge dealing with the number of offenders presented with learning disabilities.

4. **Substance Abuse Services:**

a. What substance abuse treatment or education programs does this institution have?

**Response:** This institution has offender-based NA and AA groups. Programs include Pathway to Change, Inside/Out Dads, Anger Management and Impact of Crimes on Victims Class.

b. How many beds are allocated to those programs?

**Response:** Not applicable.

c. How many offenders do those programs serve each year?

**Response:** The following numbers were served from October 2011 to October 2012:

- Pathway to Change – 110 offenders;
- Anger Management – 30 offenders;

- **Inside/Out Dads – 19 offenders; and**
- **Impact of Crime on Victims – 74 offenders.**
- d. What percent of offenders successfully complete those programs?  
**Response: The following percentage of offenders successfully completed these programs from October 2011 to October 2012:**
  - **Pathway to Change – 78.18%;**
  - **Anger Management – 80.00%;**
  - **Inside/Out Dads – 52.63%; and**
  - **Impact of Crime on Victims – 83.78%.**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?  
**Response: Not applicable.**

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?  
**Response: Crossroads Correctional Center does not offer any type of vocational programs to the offender population.**
- b. How many offenders (and %) participate in these programs each year?  
**Response: Not applicable.**
- c. Do the programs lead to the award of a certificate?  
**Response: Not applicable.**
- d. Do you offer any training related to computer skills?  
**Response: Not applicable.**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?  
**Response: The products manufactured at the MVE/CRCC Consumable Products Factory are toilet tissue (both 1 and 2-ply), plastic trash bags of assorted sizes in clear and black, pleated and fiberglass HVAC filters in standard sizes and special sizes upon request.**
- b. How many (and %) of offenders work for MVE at this site?  
**Response: CRCC MVE presently employs 48 offenders, which is 3.26% of the offender population.**
- c. Who are the customers for those products?  
**Response: Customers consist of the Missouri Department of Corrections and all other Missouri state agencies. We also sell our products to schools, churches and other not-for-profit organizations in Missouri, as well as any State of Missouri employee. Besides these Missouri customers, we also sell toilet tissue to PEN Products, MVE's counterpart in Indiana, for adding value to their prison industries program and resale to their state customers in Indiana. We also sell to Iowa Prison Industries for resale and distribution to Iowa Department of Corrections.**
- d. What skills are the offenders gaining to help them when released back to the community?  
**Response: The mission statement of Missouri Vocational Enterprises is "to provide employment for offenders that will encourage them to develop favorable attitudes and useful skills. Enhance public safety by maximizing education and job training of offenders for success, while incarcerated and upon release." But more simply stated, MVE/CRCC Consumable Products Factory instills the responsibility to have offenders report to work, on time, on a daily basis. For some, this may be the first time in their lives when they have had to take on this responsibility. For others who have worked previously outside a prison setting, it reinforces this ethic. We teach or reinforce the skills to produce quality products at competitive costs which our end customers can be satisfied using. Staff try to lead by**

example and always attempt to demonstrate to offenders the standards for living which will make them more prepared to reenter society. For those offenders who wish to participate, we also offer training in computer literacy and workplace essential skills.

**7. Medical Health Services:**

a. Is the facility accredited by the National Commission on Correctional Health Care?

**Response: Yes.**

b. How many offenders are seen in chronic care clinics?

**Response: There are currently 988 offenders enrolled in chronic care.**

c. What are some examples of common medical conditions seen in the medical unit?

**Response: Conditions such as, diabetes, asthma, HIV, hepatitis, cardiac issues and cancer are the more chronic conditions, in addition to, the more acute incidences of injuries during recreation, seasonal illnesses and aches/pains.**

d. What are you doing to provide health education to offenders?

**Response: Annual health fair, daily education as patients present to sick call, medical information sheets/pamphlets available in Medical.**

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

**Response: No, we have had no active tuberculosis cases in the past year.**

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

**Response: Yes, it is affecting health care in prisons. We are seeing more permanent patients in the infirmary, as well as more admissions to the infirmary. In general, more patients are requiring the use of wheelchairs, more medications being ordered and more medications needing to be “watch-take” status as the elderly are unable to maintain control of multiple medications and the dosages for such.**

**8. Mental Health Services:**

a. How do offenders go about obtaining mental health treatment services?

**Response: Offenders may request an individual encounter with a qualified mental health professional by submitting a medical services request. Once a request is received, the offender is sent a reply that the request was received and scheduled for an appointment to address their concerns. Staff referrals also generate individual encounters and are handled in a similar fashion. Additionally, offenders transferred into the institution are seen and evaluated by a qualified mental health professional according to their determined mental health level and needs.**

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

**Response: There have been no successful suicides at CRCC in the last year. When an offender feels suicidal or makes a statement of harming himself, he is placed on suicide watch and is assessed daily by a qualified mental health professional. Additionally, all DOC staff members are trained to recognize verbal and behavioral cues that indicate potential suicide. This instruction is provided to staff during initial training and every year thereafter.**

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

**Response: There are 138 offenders receiving psychotropic medications, which is 9.39% of the offender population.**

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

**Response:** There are currently 144 offenders who are considered to have a moderate level of mental health needs and 19 offenders who are considered to have serious functional impairment due to a mental disorder. Of the total 163 offenders, there are 12 offenders who currently have an involuntary medication order in place. Those offenders under an order of involuntary medication are seen every two weeks. All of these offenders meet with a qualified mental health professional at a minimum of once every month. Additional therapy sessions are scheduled in response to medical services requests submitted by offenders and staff referrals.

9. What is your greatest challenge in managing this institution?

**Response:** Managing available resources – Over recent years, the Department has experienced multiple reductions in both staffing and funding. These issues, in conjunction with the Department's historic high employee turnover rates and growing workloads, make it evermore difficult to fulfill the institution's mission.

10. What is your greatest asset to assist you in managing this institution?

**Response:** The staff at the institution and support structure provided by Central Office.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

**Response:** Fair condition; we do have the following vehicles in our fleet with high mileage (13-0165M – 121,234 miles; 13-0427M – 137,424 miles; 13-0913M – 159,404 miles; and 13-0939M – 180,004 miles

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer)

**Response:** Over the past several years, staff have been requested and expected to do more with less during these tough economic times. Through the continued effort put forth by the administrative team and supervisory staff, I would consider custody staff morale at a high level.

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

**Response:** CRCC has 16 case manager positions.

B. Do you currently have any caseworker vacancies?

**Response:** We currently have no case manager vacancies

C. Do the caseworkers accumulate comp-time?

**Response:** Case managers accumulate minimal comp time.

D. Do the caseworkers at this institution work alternative schedules?

**Response:** As required.

E. How do inmates gain access to meet with caseworkers?

**Response:** By completion of an offender request form from staff.

F. Average caseload size per caseworker?

**Response:** 250-288 offenders.

- # of disciplinary hearings per month?

**Response:** 213 disciplinary hearings per month.

- # of IRR's and grievances per month?

**Response:** Approximately 197 IRR's/111 grievances per month.

- # of transfers written per month?

**Response:** 30 transfers per month.

- # of re-classification analysis (RCA's) per month?



**Response: Approximately 150 RCA's per month.**

G. Are there any services that you believe caseworkers should be providing, but are not providing?

**Response: No.**

H. If so, what are the barriers that prevent caseworkers from delivering these services?

**Response: Not applicable.**

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

**Response: Impact of Crime on Victims, Restorative Justice, Pathways to Change, Inside/Out Dads, Anger Management, New Leash on Life Dog Program.**

J. What other duties are assigned to caseworkers at this institution?

**Response: Family contact, process and track food visit requests, process visiting applications, return family phone calls, complete adult internal classification system, conduct protective custody hearings, conduct classification hearings, determine enemy situations, conduct crisis counseling, monitor laundry, monitor cleanliness, process new offenders, visiting room liaison, general liaison, involvement in litigation, involvement in handling clothing and property, complete institutional transitional accountability plan, etc.**

#### 14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?

**Response: 1.5.**

B. Do you currently have any staff shortages?

**Response: No.**

C. Do the parole officers accumulate comp-time?

**Response: No.**

D. Do the parole officers at this institution flex their time, work alternative schedules?

**Response: Yes, they flex their time.**

E. How do inmates gain access to meet with parole officers?

**Response: Offenders can request an appointment with the Institutional Parole Officer in writing.**

F. Average caseload size per parole officer?

**Response: We currently have one Institutional Parole Officer handling the entire institution with some assistance from the Probation Officer III.**

- # of pre-parole hearing reports per month?

**Response: 12.**

- # of community placement reports per month?

**Response: 2.**

- # of investigation requests per month?

**Response: 8.**

G. Are there any services that you believe parole officers should be providing, but are not providing?

**Response: No.**

H. If so, what are the barriers that prevent officers from delivering these services?

**Response: Not applicable.**

I. What type of inmate programs/classes are the parole officers at this institution involved in?

**Response: Programs are generally handled by the Classification staff.**

#### 15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

**Response: The Warden has no other issues to discuss or bring to the attention of members of the Joint Committee on Corrections.**

16. Does your institution have saturation housing? If so, how many beds?

**Response: No.**

**17. Radio/Battery Needs:**

a. What is the number of radios in working condition?

**Response: 203.**

b. Do you have an adequate supply of batteries with a good life expectancy?

**Response: Yes.**

c. Are the conditioners/rechargers in good working order?

**Response: All batteries, conditioners and rechargers are brand new.**

# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: Eastern Reception Diagnostic & Correctional Center				
Custody Level	4/5		Warden	Terry Russell
Total Acreage	213		Address	2727 Highway K
Acreage w/in Perimeter	76			Bonne Terre, MO. 63628
Square Footage	693,410		Telephone:	573-358-5516
Year Opened	2003		Fax:	573-358-0734
Operational Capacity/Count (as of November 30, 2012)	2721			
General Population Beds (capacity and count as of November 30, 2012)	Capacity – 1714 Count – 1708		Deputy Warden	Joe Hoffmeister, DWO
Segregation Beds (capacity and count as of November 30, 2012)	Capacity – 430 Count – 336		Deputy Warden	Jason Lewis, DWOM
Treatment Beds (capacity and count as of November 30, 2012) TCU Beds - Medical	Capacity – 24 Count – 8		Asst. Warden	Stan Jackson, G.P.
Work Cadre Beds (capacity and count as of November 30, 2012)	Capacity – 96 Count – 91		Asst. Warden	Stan Payne, R&D
Diagnostic Beds (capacity and count as of November 30, 2012)	Capacity – 1007 Count – 1217		Major	Fred Treece
Protective Custody Beds (capacity and count as of November 30, 2012)	Capacity – 72 Count – 72			

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?

**Fair to Good**

- b. What capital improvement projects do you foresee at this facility over the next six years?

- 1. The Johnson Controls Metasys BAS system needs upgraded within the near future. The BAS computer is NT bases computer, this is going to a big problem in the future.**
- 2. Replacement of the VFD for pumps 9 and 11. If the outside temperature falls to 25 degrees or below, we will not be able to adequately heat the institution without valving off sizeable sections of space.**
- 3. Replacement of the drives for pumps 7 & 8. The issue is similar to the issue in number one, but it pertains to the cooling of the institution instead of heating.**

- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
**Without these improvements we will no longer be able to maintain the heat and cooling of the institution.**

## 2. Staffing:

- a. Do you have any critical staff shortages?  
**COIs as reported last year continue to be at a monthly hiring rate of at least 5 each month creating staffing difficulties with an already minimal workforce. Considering the realignment directives given for CCM and SK attrition and the fact that the inmate population has been over our determined base for past twelve months; ERDCC's deficits in these areas make staffing for these positions an arduous task.**
- b. What is your average vacancy rate for all staff and for custody staff only?  
**All staff average vacancy rate is 7.3, Custody average per month is 5 and Non Custody average per month is 2.3.**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
**The accrual and usage of comp-time is difficult to manage as an effective balance is tricky to achieve. Administrative pressure to alleviate overtime or use comp-time causes a shift/institution to staff at the minimum levels. When the number of staff on site is increased to achieve goals outlined by administration, comp-time is also increased by default.**
- d. What is the process for assigning overtime to staff?  
**The assignment of overtime to staff is done on a voluntary and mandatory basis which is governed by Procedures/Post Orders. One determines the need for a staff member to accrue overtime based on the minimum staffing needs of the shift/institution. If the shift is below minimum staffing, staff would need to volunteer to fill vacancies until the minimum staffing is met/achieved. If there are no volunteers, staff is mandated to stay and accrue comp-time based upon the mandatory overtime list until the minimum staffing is met/achieved.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Percentage of comp hours paid were 42% and hours used were 58%. The math is 42,543 total hours used and paid. 24,612 hours used and 17,931 paid.**
- f. Is staff able to utilize accrued comp-time when they choose?  
**Unfortunately for custody NOT usually due to staffing. Non-custody does seem to be able to utilize their comp time.**

### 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?

*GP: 279 students enrolled (53%), 385 seats available, 72% seat utilization, 251 students on waiting list. As of October 9, 2012.*

<b>FY</b>	<b>Served</b>	<b>FY Gain</b>	<b>Reading</b>	<b>Math</b>	<b>Language</b>
<b>FY06</b>	<b>469</b>	<b>381 (81%)</b>	<b>62% 3.4</b>	<b>75.3% 3.7</b>	<b>74.8% 5.1</b>
<b>FY07</b>	<b>449</b>	<b>361 (80%)</b>	<b>58.4% 3.5</b>	<b>72.6% 3.7</b>	<b>71.0% 5.1</b>
<b>FY08</b>	<b>465</b>	<b>354 (76%)</b>	<b>57.2% 3.4</b>	<b>67.5% 3.6</b>	<b>65.4% 5.0</b>
<b>FY09</b>	<b>615</b>	<b>265 (43.2%)</b>	<b>15.0% 1.7</b>	<b>30.1% 1.2</b>	<b>18.0% 2.0</b>
<b>FY10</b>	<b>473</b>	<b>353 (74.6%)</b>	<b>58.1% 10.2</b>	<b>66% 12.1</b>	<b>62.2% 15.1</b>
<b>FY11</b>	<b>574</b>	<b>242 (42.2%)</b>	<b>11.8% 1.3</b>	<b>13.8% 1.1</b>	<b>17.4% 1.9</b>
<b>FY12</b>	<b>639</b>	<b>402 (62.9%)</b>	<b>93.3% 0.9</b>	<b>75.1% 1.5</b>	<b>77.1% 1.2</b>

This chart shows the number of students who passed through our school during the fiscal year and % of those who showed grade level gains in each required subject area.

**RD: 5 inmates earned their GED last year. They were not students. They were tested without being enrolled in school. It was the first year for GED testing on the diagnostic side.**

- b. How many (and %) of inmate students earn their GED each year in this institution?

**ERDCC**

**Department GED FY data**

<b>Tested</b>	<b>Pass</b>	<b>Fail</b>	<b>Sessions</b>	<b>%</b>
<b>FY 06</b>	<b>36</b>	<b>33</b>	<b>3</b>	<b>5 92%</b>
<b>FY 07</b>	<b>74</b>	<b>60</b>	<b>14</b>	<b>7 81%</b>
<b>FY 08</b>	<b>55</b>	<b>47</b>	<b>8</b>	<b>9 85%</b>
<b>FY 09</b>	<b>49</b>	<b>31</b>	<b>18</b>	<b>8 63%</b>
<b>FY10</b>	<b>82</b>	<b>55</b>	<b>27</b>	<b>11 67%</b>
<b>FY 11</b>	<b>59</b>	<b>49</b>	<b>10</b>	<b>11 83%</b>
<b>FY12</b>	<b>64</b>	<b>61</b>	<b>3</b>	<b>10 95%</b>
<hr/>				
	<b>419</b>	<b>336</b>	<b>83</b>	<b>61 80%</b>

**GED earned by age 17-22 FY09 7 FY10 6 FY11 8 FY12 11**

- c. What are some of the problems faced by offenders who enroll in education programs?
- **Our offenders have low functioning math skills and/or low skills in written expression. Some remedies to this are to provide math pre-tests, advance core curriculum development in math and focus on calculator skills; establish writing portfolios and writing assignments at all grade levels; professional development for offender tutors and academic teachers in best practices.**
  - **Some offenders do not see the urgent relevance or need in obtaining their GED or in the curriculum material itself. Some remedies are one-on-one meetings by staff committee with offenders who are unmotivated or unwilling to participate. Staff development on relevancy and adult classroom material.**
  - **Many offenders exhibit learning disabilities for adult learners over the age of 22. Some remedies are to perform staffing on each offender who is identified as having a learning difficulty to determine if a learning disability exists and to ensure all documentation is current in order to request the appropriate accommodations for each individual learner.**

**Currently, education does not offender programs on the diagnostic side.**

**Education is actively seeking ways to better serve offenders in diagnostic status. Our efforts to allow offenders to earn a GED while in diagnostic status have been shared with other diagnostic centers with encouragement to implement similar programs. Currently we are working to find the best way to offender Workplace Essential Skills to offenders on the diagnostic side.**

**4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?  
**ERDCC does not provide substance abuse treatment, but offers a 12 week substance abuse education program (Living in Balance) facilitated by classification staff.**
- b. How many beds are allocated to those programs?  
**No beds are allocated for R&D.**
- c. How many offenders do those programs serve each year?  
**Approximately 60 offenders on the permanent population side per year are enrolled. The program is not available to R&D offenders.**
- d. What percent of offenders successfully complete those programs?  
**65-70% of those enrolled complete the program with the majority of the remainder discharged due to segregation assignment, disciplinary segregation assignment, or due to institutional transfers. Not applicable to R&D offenders.**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **Obtaining and training qualified persons who understand substance abuse issues and how the program is designed.**

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? **ERDCC does not offer any vocational education programs**
- b. How many offenders (and %) participate in these programs each year? **N/A**
- c. Do the programs lead to the award of a certificate? **N/A**
- d. Do you offer any training related to computer skills? **N/A**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?  
**A complete line of janitorial, laundry, kitchen and personal care products are manufactured at ERDCC. We also manufacture corrugated cartons.**

- b. How many (and %) of offenders work for MVE at this site?  
**Twenty-Six (26) offenders are employed, representing 2% of offender workers available at ERDCC.**
- c. Who are the customers for those products?  
**State agencies, institutions, city and county governments, political subdivisions, state employees, not-for-profit organizations and other tax supported entities.**
- d. What skills are the offenders gaining to help them when released back to the community?  
**Work place essentials skills, including manufacturing procedures, production techniques, quality control, inventory control, cost control, work place safety, shipping and receiving. They are also obtaining applicable work skills and habits. Some positions qualify for the U.S. Department of Labor's Apprenticeship Program.**

#### 7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?  
**No. ERDCC survey dates are Dec 5-7, 2012.**
- b. How many offenders are seen in chronic care clinics?  
**There are approximately 1817 offenders enrolled in chronic care clinics at ERDCC. The most common chronic illness is Cardiovascular, with 621 offenders currently enrolled, and the second most common is Hepatitis C, with 234 offenders currently enrolled.**
- c. What are some examples of common medical conditions seen in the medical unit?  
**Routine illnesses seen in the medical unit include minor to severe infections, skin conditions, wounds and chronic back pain. Common emergency situations include chest pain, seizures, asthma attacks, sports related injuries and lacerations.**
- d. What are you doing to provide health education to offenders?  
**Health education is provided to offenders through annual offender health fairs, through chronic care clinics, and through routine nursing sick calls. Health education pamphlets are also available in the health care department. Additionally, new offenders received at ERDCC are provided with oral and written education in their Reception and Orientation and Reception and Diagnostic packets.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? If so, how did you respond?  
**No active TB cases in the past year.**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.  
**Yes, the aging population affects health care in prison. Improved standards in correctional healthcare have led to longer patient life spans. The older the patient gets, the more likely they are to develop age related chronic diseases, thus increasing the demand on all aspects of healthcare delivery. Older patients require special housing facilities, i.e. nursing home style housing units. They increase the demand for healthcare staff to care for them. They also pose increased demand for medications, supplies and specialty care.**

#### 8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?  
**Offenders receive mental health services by submitting an MSR, referral by staff, or enrollment in the chronic care clinic.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?  
**One suicide occurred during the past year.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?  
**Approximately 17% of the population of offenders at this facility are prescribed psychotropic medications for a mental illness.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?  
**Approximately 500 offenders are currently enrolled in the Mental**

**Health Chronic Care Clinic. These offenders are seen at minimum of once per month by a Qualified Mental Health Professional for assessment and Cognitive Behavioral Therapy and once every 90 days by a Psychiatrist for medication management. In addition, Mental Health Psycho educational groups are provided for all offenders in General Population as well as a specialized program for offenders in segregation. Crisis intervention is provided to all offenders as needed.**

9. What is your greatest challenge in managing this institution?

**The mere size and complexity of this institution is a challenge. With more than 2700 offenders and nearly 900 staff, it is a small city with the complexity of a Reception and Diagnostic Center, a level 4/5 general population unit and a minimum security unit within the security perimeter. These dynamics offer unique challenges and opportunities for management. The challenge is enhanced with issues such as managing call outs. FMLA and Leave Without Pay for the staff. In additions, the current economic climate of the nation and revenues of the State of Missouri present unique challenges in managing an institution of this size and operating within the boundaries of current budgetary constraints.**

10. What is your greatest asset to assist you in managing this institution?

**This institution is very fortunate to have an excellent Administrative Team and a host of hard working, dedicated employees committed to the Department's Mission.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

**Poor to Fair**



**The following list is a complete report on the status of the ERDCC vehicle fleet:**

VEHICLE IDENTIFICATION NUMBERS						
LICENSE#	MAKE	CLASS	MILES	YEAR	CONDITION	DOC I.D. #
13-0014	FORD	FULL SIZE SEDAN	102575	2007	Fair/ Good	245853
13-0122	FORD	FULL SIZE SEDAN	106160	2007	Fair / Good	245852
13-0248	FORD	FULL SIZE SEDAN	177226	2007	Rough / High miles	244226
13-0371	INTERNATNL	PASSENGER BUS	67446	2010	good	15552
13-0508	FORD	FULL SIZE SEDAN	107922	2007	Fair / Good	245851
13-0824	FREIGHTLINER	2 TON FLAT BED	19651	2000	good	237275
13-0826	FORD	DUMP TRUCK	7507	2000	good	237334
13-0827	FORD	DUMP TRUCK	12540	2000	good	237333
13-0829	BLUEBIRD	PASSENGER BUS	249718	2001	Being replaced	238220
13-0860	FORD	FULL SIZE SEDAN	101844	2007	Fair / Good	243438
13-0862	DODGE	1/2 TON 2WD PICKUP	29367	2002	good	239619
13-0866	CHEVROLET	15 PASSENGER VAN	189021	2002	rough high miles/ uses oil	239691
13-0872	FORD	15 PASSENGER VAN	180100	2003	fair high miles uses oil front end weak	239873
13-0873	FORD	15 PASSENGER VAN	208718	2003	fair high miles uses oil front end weak	239874
13-0874	FORD	15 PASSENGER VAN	12145	2012	new	239875
13-0875	FORD	15 PASSENGER VAN	172121	2003	fair high miles uses oil front end weak	239876
13-0876	DODGE	MINI VAN	174400	2003	No longer in fleet	239893
13-0877	DODGE	MINI VAN	166368	2003	fair high miles used for v.p.	239894
13-0878	DODGE	MINI VAN	185890	2003	fair high miles used for v.p.	239895
13-0879	DODGE	MINI VAN	193956	2003	fair high miles used for v.p.	239896
13-0880	DODGE	MINI VAN	166297	2003	fair high miles	239897
32-0267	CHEVROLET	UPLANDER VAN	155466	2008	fair high miles	135140
32-0276	CHEVROLET	UPLANDER VAN	153072	2008	fair high miles	135149
32-0280	CHEVROLET	UPLANDER VAN	176552	2008	fair high miles	135141
13-0888	FORD	FULL SIZE SEDAN	169537	2008	fair/ high mileage/ paint peeling	244453
13-0890	FORD	F150 1/2 TON PICKUP	31910	2003	good	239933
13-0891	FORD	F150 1/2 TON PICKUP	21351	2003	good	239934
13-0892	FORD	F150 1/2 TON PICKUP	31919	2003	good	239935
13-0893	CHEVROLET	2500 HD 3/4 TON 4WD P/U	34361	2003	good	239977
13-0899	FORD	BOX BED	73014	2003	good	239987
13-0900	BLUEBIRD	PASSENGER BUS	212950	2003	fair/rough high miles	239997
13-0901	FORD	EXPLORER	68951	2003	Fair / Wrecked one side	240598

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.

**The overall level of morale at ERDCC among custody staff appears to be medium. Most of the negative issues impacting morale were things listed as not under the direct control of local supervisors and administrators. The survey indicated a positive local environment. Common concerns were low pay, rising costs of medical coverage and staffing.**

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

**C&A: 2 CCMIIIs, 6 CCMI/IIIs, & 1 CCA**

**R&D: 8 CCMI/IIIs**

**GP: 16 CCMI/II's, 1 CCA**

**Grievance: 1 CCMII**

**TOTAL: 2 CCMII's, 31 CCMI/II's, & 2 CCA**

B. Do you currently have any caseworker vacancies?

**No vacancies at this time.**

C. Do the caseworkers accumulate comp-time?

**Due to budget constraints, comp time is not normally approved. However, staff may flex the time off later in the week if necessary.**

D. Do the caseworkers at this institution work alternative schedules?

**All work five 8-hour shifts, but start/end times range between 7:00am-4:30pm, Mon-Fri.**

E. How do inmates gain access to meet with caseworkers? **Open office hours are held daily. The adseg case managers do rounds every day.**

F. Average caseload size per caseworker?

# of disciplinary hearings per month?

• **GP: 22 avg. per each 13 CCMII's**

• **R&D: 41 avg. per each 6 CCMII's**

# of IRR's and grievances per month?

• **IRR: 25 avg. per each 10 CCMII's**

• **Grievances: 94 avg. per 1 CCMII**

# of transfers written per month? **GP: 49 R&D: 410**

# of re-classification analysis (RCA's) per month? **GP: 215 RCAs R&D: 208 ICAs**

G. Are there any services that you believe caseworkers should be providing, but are not providing?

**More programming services in areas such as Employability Skills/Life Skills and Substance Abuse**

H. If so, what are the barriers that prevent caseworkers from delivering these services?

**Reduction in staffing patterns coupled with lack of qualifications/training**

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

**Pathways to Change, Anger Management, Impact of Crime on Victims, Inside Out Dads, Living In Balance, Employability Skills /Life Skills, New Offender Orientation, and Puppies for Parole**

J. What other duties are assigned to caseworkers at this institution?

**Orientation for incoming offenders in Diagnostic. Assisting with the yearly internal security audits, update offender management plans (TAPS), review offender program plans following administrative segregation releases, serve on segregation hearing committees, assist with clothing/laundry/and legal mail issues, receive/process visiting and food visit request forms, receive and review incentive housing application requests, direct and monitor the Puppies for Parole program activities, receive and validate Qualified Legal Claim forms, assist offenders with telephone and Canteen kiosk issues, receive requests for information from family members and supervisory staff, answer offender correspondence, make pertinent electronic chronological log entries, assist custody staff with escorts/searches/security checks, and arrange/monitor special phone call requests.**

#### **14. Institutional Probation and Parole officers:**

A. How many parole officers are assigned to this institution? **11**

B. Do you currently have any staff shortages? **No**

C. Do the parole officers accumulate comp-time?

**Yes, the parole officers at ERDCC do accumulate comp-time on occasion. Generally, this only happens when they attend training or meetings away from the institution or travel to another institutional parole office to assist them.**

D. Do the parole officers at this institution flex their time, work alternative schedules?

**Yes. We encourage staff to flex their time during the FLSA workweek as necessary to best assist offenders and ERDCC staff.**

E. How do inmates gain access to meet with parole officers?

**Parole officers meet with R&D offenders in staff dining every day during the morning hours, by utilizing the lay-in process. Parole Officers meet with GP offenders every day in the afternoon hours in their respective housing units. If offenders are in PC, Ad Seg, Medical or must be seen ASAP, officers go to the housing units to see them.**

F. Average caseload size per parole officer? **280**

- # of pre-parole hearing reports per month? **102**
- # of community placement reports per month? **9**
- # of investigation requests per month? **83**

G. Are there any services that you believe parole officers should be providing, but are not providing?

**A few parole officers at ERDCC have completed the Pathways to Change facilitator training and are available as needed. Staff have also attended training for the MRP/TAP and will assist in whatever way the institution wishes to utilize them. They are also involved in the orientation program for new offenders.**

H. If so, what are the barriers that prevent officers from delivering these services?

**The administration/staff at ERDCC work very well with parole staff.**

I. What type of inmate programs/classes are the parole officers at this institution involved in?

**Parole officers are involved in the Friends and Family Orientation Program, Employability Skills/Life Skills Classes, Pathways to Change and MRP/TAP and a Pre-release Program for offenders that are within 4 months of their projected release date. Offenders are shown a film that is designed to help them to be successful on supervision when released. Parole officers are available to answer any questions the offenders may have regarding a successful release on parole.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **We continue to strive for innovative methods to maintain our fiscal responsibility during the current budgetary climate.**

16. Does your institution have saturation housing? **No** If so, how many beds? **N/A**

17. **Radio/Battery Needs:**

a. What is the number of radios in working condition?

**We have 500 radios in good working condition**

b. Do you have an adequate supply of batteries with a good life expectancy?

**Yes we do for the new radios. We received 2 batteries with each radio. These are the new Li-ion battery's and their life expectancy is supposed to be better than the old batteries. They still have the same problem with over charging and memory but they should last longer. They can not be reconditioned and when they are bad we dispose of them. We have a total of 840; the manufacturer says the batteries are good for 1 year. We have 80 of the old radios still in service and we only have 50 good batteries for them. I have requested an additional 80 be ordered to make up the difference. Note: If batteries are not properly cared for the life expectancy would be greatly reduced, i.e. over charging and if they receive damage to clips while trying to be installed.**

c. Are the conditioners/rechargers in good working order?

**We do not use conditioners for the new batteries. All chargers are new and in good working condition.**

# **Joint Committee on Corrections 2012**

## **Information for Legislative Institutional Visits**

Facility Name: Farmington Correctional Center				
Custody Level	C-4		Warden	Tom Villmer
Total Acreage	350		Address	1012 W. Columbia
Acreage w/in Perimeter	115			Farmington, MO 63640
Square Footage	117359		Telephone:	573-218-7100
Year Opened	1986		Fax:	573-218-7110
Operational Capacity/Count (as of November 30, 2012)	2635/2599			
General Population Beds (capacity and count as of November 30, 2012)	1798/1783		Deputy Warden	Mike Gann Ext. #203
Segregation Beds (capacity and count as of November 30, 2012)	175/142		Deputy Warden	Tami White Ext. #206
Treatment Beds (capacity and count as of November 30, 2012)	324/278		Asst. Warden	Bill Bowyer Ext. #395
Work Cadre Beds (capacity and count as of November 30, 2012)	N/A		Asst. Warden	Bob Peura Ext. #400
Diagnostic Beds (capacity and count as of November 30, 2012)	N/A		Major	Jim Gober Ext. #251
Protective Custody Beds (capacity and count as of November 30, 2012)	N/A			
MOSOP (capacity and count as of November 30, 2012)	276/276			
Mental Health (capacity and count as of November 30, 2012)	120/119			

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?

**Assessment of the overall condition of FCC's physical plant is poor to fair, and what is to be expected at this point considering the age of the components.**

- b. What capital improvement projects do you foresee at this facility over the next six years?

**Well #1 will not run due to lack of communication from well to Power Plant control system. Efforts to repair the issue have failed; the well can be run manually but still does not communicate and can not be placed fully on line.**

**Wells were taken over by the City of Farmington in 2012.**

Water tower needs to be brought up to DNR code, interior coating and exterior maintenance, including adjustments to the windage rods.

Water tower also taken over by City of Farmington in 2012.

Building #20 A-Chapel roof replacement, there are shingles missing and decking showing causing multiple roof leaks. In process of being repaired

Parking lot lighting is in need of an update as the parking lots have been expanded but no additional lighting added.

Southwest wall of building #14 wall is bulging; the condition of this wall continues to deteriorate adding to the threat of collapse, which is a safety hazard. Noted to OAFMDC

Emergency generator for Main Production food service area, this area has no emergency back-up power making it extremely difficult to prepare food during extended outages and creates unsafe working conditions for staff and offenders.

Building #30/Drum building all air handlers need replaced, they are beyond their expected working life, confirmed by VFA.

Building #28 roofing needs replaced. Roof material is dry and brittle; walking across roof to make repairs often results in creating more leaks. Scheduled for rebid

Building #11/Administration, roof material is aged and dried out; it is past its expected life span and is in need of total replacement. In process of being repaired

Buildings #18 and #19 heating systems extensive repairs, replacement with air handler systems recommended, aged leaking water systems in walls make repairs difficult, time consuming and costly. Many of the radiator type wall units have been piped through to eliminate leaks greatly reducing effectiveness of the units and the system.

Building #14/Main Production roof top freezer units are old and failing, they need replaced.

Housing Units #6-#9 (B-Side) rooftop HVAC units need replaced, VFA confirmed units are well beyond their expected service life.

Building #29 two roof top HVAC units need replaced, these units are especially old and in constant need of repair, VFA also confirmed need to replace. 1 unit replaced-1 to go

Cottage Row buildings need wood trim repairs/replacement, this requires a Genie lift, unsuccessful requests have been made to Heavy Equipment for the loan of a lift during seasons when weather permits work to be done. We realize that they only have so many lifts to go around; however this work is critical to the life of the structures. Partial complete

Building #29, #30 and #31 needs extensive tuck pointing, rain water infiltrating the walls make it impossible to maintain interior walls and continues to deteriorate and weaken the infrastructure. Building #31 due to rehab

Utility Tunnel between Building #10 and #30 roadway surface/tunnel roof deteriorating creates concerns of collapse of the tunnel. This has been shored up with steel until a permanent fix can be scheduled and funded.

Building #34 Power Plant, the penthouse parapet wall needs tuck pointing. Brick wall is visibly leaning and is close to failure.

Old power plant smokestack needs demolished; bricks and brick facades are falling from the stack now and should this smokestack even partially collapse the effects could be catastrophic, especially since this building is manned 24 hours a day.

Plans to demo smokestack in FY2014

Road surfaces are in very poor condition and need to be replaced/resurfaced; perimeter roads as well as roadways within the institution. These conditions can damage equipment, slow vehicular traffic during emergencies and create tripping hazards for offenders and staff alike. Plans to patch spring 2013

Del Norte security fence system, Southwest Microwave (sole source supplier) has advised they can no longer guarantee parts availability after January 01, 2010. During our latest conversation with them they informed us they will no longer make cable assemblies for this system and other components are already difficult to find. Any major breakdown to the system due to lightning, etc. could create a long-term security breach for the institution.

In process of replacing system

The tuck pointing that is listed should be considered a partial listing only. Each month, year, etc that goes by only adds more areas to the list of buildings that are in need of this care. In order for the interior of a building to be kept in the best possible condition, the outside of the structure must be kept sound and safe from the elements. The most serious problem relates to the need of many of FCC's buildings needing new roofs.

c. How critical do you believe those projects are to the long-term sustainability of this facility?  
All the areas of our concerns listed are vital to the long-term sustainability of this facility.

2. **Staffing:**

a. Do you have any critical staff shortages?

**All staff shortages are critical.**

b. What is your average vacancy rate for all staff and for custody staff only?

**FCC MONTHLY VACANCIES**

**Fiscal Year 2012**

<b><u>MONTH</u></b>	<b><u>YEAR</u></b>	<b><u>CUSTODY</u></b>	<b><u>NON-CUSTODY</u></b>
July	2011	7	6
August	2011	3	6
September	2011	4	5
October	2011	6	6

<b>November</b>	<b>2011</b>	<b>6</b>	<b>1</b>
<b>December</b>	<b>2011</b>	<b>6</b>	<b>2</b>
<b>January</b>	<b>2012</b>	<b>5</b>	<b>2</b>
<b>February</b>	<b>2012</b>	<b>4</b>	<b>5</b>
<b>March</b>	<b>2012</b>	<b>3</b>	<b>4</b>
<b>April</b>	<b>2012</b>	<b>5</b>	<b>3</b>
<b>May</b>	<b>2012</b>	<b>4</b>	<b>3</b>
<b>June</b>	<b>2012</b>	<b>5</b>	<b>1</b>

**FCC Vacancies as of November 30, 2012**

<b><u>Class Title</u></b>	
COI	9
SAC I/II	2
CCM I/II	2
Tractor Trailer Driver	1

- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

**Yes, it limits us from using certain staff to cover posts when needed.**

- d. What is the process for assigning overtime to staff?

**Ask for volunteers, and then use a mandatory list if necessary.**

- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

**The average is 20% taken and 80% paid.**

- f. Is staff able to utilize accrued comp-time when they choose?

**Supervisors make every effort possible to approved compensatory time off at the staff member's choosing. There are instances when the request has to be denied due to having to fill all mandated custody posts, as not to jeopardize the safety of staff/offender or negatively affect the security of the institution. If this situation arises, efforts are made to accommodate the staff members by approving the time off or another date of the officer's choosing.**

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?

**As of October 1, 2012, FCC Education enrolled 508 offenders out of 539 offenders requiring education services resulting in 94% being served. Contract services were provided for FTIP (Housing Unit #10) enrolling 103 offenders of the 234 requiring services resulting in 44% being served. The remaining 6% at FCC are offenders assigned to Administrative Segregation or offenders who have been determined academically unable. The remaining 66% of FTIP offenders are unable to be served due to lack of available seats.**

- b. How many (and %) of inmate students earn their GED each year in this institution?

As of October 2012, 119 FCC offenders earned their GED resulting in a percentage of 23%. Also as of October 2012, approximately 50 GEDs were earned in FITP (Housing Unit #10).

c. What are some of the problems faced by offenders who enroll in education programs?

Many offenders lack the motivation needed for success. They have previously terminated their education due to lack of interest as well as lack of self-control/social skills. Once incarcerated, many may be consumed with thoughts of the "outside" and experience an increased feeling of hopelessness and failure. Others have endured traumatic brain injuries and/or are heavily medicated due to physical or mental disabilities. These students may not have the ability to be successful in Education or earn a GED.

Multiple building repairs/upgrades are needed in both Building #18 and #19. Extreme temperatures can cause issues with attention and cooperation in classrooms. Also at times classes are suspended due to water leaks or the water being shut down in the building. Additionally, there are not enough working restrooms for offender use. Due to the electricity in the building, we are also unable to provide adequate computer equipment in each classroom.

FCC Education is separated into two buildings. Offender movement from side to side of the institution often causes an offender to be transferred to a new classroom and a new teacher. This frequent movement leads to lower progression in offender progress. In addition, many offenders are heavily medicated causing difficulties in concentration. It is also difficult for some offenders to attend Education due to other programming such as SOAU, MoSOP and LTP.

4. **Substance Abuse Services:**

a. What substance abuse treatment or education programs does this institution have?

**Farmington Treatment Center (FTC): 84 days**

**Farmington Intermediate Treatment Program (FITP): 6 months**

**Long-Term Treatment Program (LTP): 1 year**

b. How many beds are allocated to those programs?

**Farmington Treatment Center (FTC) has 195 beds**

**Farmington Intermediate Treatment Program (FITP) has 130 beds**

**Long-Term Treatment Program (LTP) has 30 beds. Long-Term offenders are housed in general population settings.**

c. How many offenders do those programs serve each year?

**Farmington Treatment Center (FTC) - 790 Offenders**

**Farmington Intermediate Treatment Program (FITP) - 260 Offenders**

**Long-Term Treatment Program (LTP) - 35 Offenders**

d. What percent of offenders successfully complete those programs?

**Farmington Treatment Center (FTC) - 87%**

**Farmington Intermediate Treatment Program (FITP) - 87%**

**Long-Term Treatment Program (LTP) - 96%**



- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

**Both treatment DAI staff were polled and they said the following were problems:**

**The different chains of command and a different emphasis on the missions. The Warden at this institution is responsible for dozens of people he does not supervise. The treatment staff members need to satisfy both the administration at the institution and their supervisors who are normally off site, occasionally receiving contradictory directives.**

**While everyone agrees security is the primary mission, treatment often requests more flexibility. Also, most prison staff members have been trained in a role that was primarily custodial. Treatment demands more involvement and the transition is difficult for many, especially without specialized training.**

**In an ideal treatment setting, those receiving treatment would be isolated from others. This is not practical for many treatment units.**

**Finally, the prison regimen (counts, appointments and meals) is often difficult to schedule around.**

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?

**Computer Literacy**

- b. How many offenders (and %) participate in these programs each year?

**Projected number of 45-60 offenders participate each year.**

- c. Do the programs lead to the award of a certificate? **Yes**
- d. Do you offer any training related to computer skills? **Yes, computer literacy class**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?

**Laundry provides laundry and dry cleaning services for a variety of sources. MVE Laundry also designs and builds laundry carts.**

**The Clothing Factory manufactures the following items: Aprons, offender work coats, jackets, Q/L jackets, coveralls, work pants, Battle Dress Uniform, shirts and pants, oven mitts, tube socks, ankle socks, laundry bags, laundry cart liners, mop heads, pillows, foam core mattresses, inner-spring mattresses, mattress covers, shower curtains, cylinder lint bags, caseworker bags, and mail bags. We now offer Battle Dress Uniform pants and shirts, jackets and coveralls in a digital print camouflage rip stop material.**

- b. How many (and %) of offenders work for MVE at this site?

**Laundry employs 219 offender workers at this time, but has the capacity to employ 240. At the Clothing/Mattress Factory, 41 offenders are currently employed. This equates to approximately 8.2% of the total offender population. We are capable of having 60 offender workers at one time in the Mattress Factory.**

c. Who are the customers for those products?

**Laundry customers are as follows: St. Joseph East (St. Charles), DePaul, St. Mary's, Cardinal Glennon Children's Hospital, St. Joseph West (Lake St. Louis), St. Clare, St. Joseph Medical Park, Ste. Genevieve County Memorial Hospital, FCC (laundry and dry cleaning), ERDCC (dry cleaning), PCC (dry cleaning), SECC (dry cleaning), and Park Hills and Farmington Police Department (dry cleaning).**

**The Clothing Factory has several different customers that we deal with. The Department of Corrections is the main customer. Other customers include state employees, state hospitals, police departments, probation and parole, fire/ambulance districts, colleges and universities. Offenders are able to purchase clothing items through the MVE basic catalog. All orders are taken at the sales office in Jefferson City.**

d. What skills are the offenders gaining to help them when released back to the community?

**Laundry: Offenders gain a sense of good work ethic and responsibility with employment in a large-scale factory. Offenders learn a number of different skills and job experiences, which include: Operating large commercial size washers, dryers, flat work irons and dry cleaning equipment. Some offenders have gained experience in personal computer data entry, fundamental record keeping, filing and inventory control. MVE Laundry also has a reliable maintenance department, which provides hands-on training on this commercial laundry equipment.**

**Computer Literacy is a five-step format for the general knowledge of a computer: (a) Computer basic; (b) Windows, Works; (c) Numbers; (d) Web. The other program is Work Place Essential Skills Literacy Link. This program helps develop skills involving employment such as: Finding a job, keeping a job, interviewing techniques, resumes, application skills, and communication skills.**

**MVE Laundry is currently in coordination with the Department of Labor (DOL) on an apprenticeship program. There are approximately 50 job occupations listed under this program for offender workers. To enter this program an offender completes an application. The appropriate DOL occupational title is assigned, along with the total of accumulated working hours under this occupation, and then sent to DOL toward an apprenticeship certificate. The number of hours required for an apprenticeship certificate is determined by the occupational title.**

**Clothing Factory: Offenders gain several different skills by working at the factory. Most workers learn to use several different types of sewing machines to make clothing, this is a very valuable skill taught to the offenders. Some also learn to layout, measure and cut patterns using various measuring and cutting tools as well as learning calculation formulas. We teach quality control and attention to detail when offenders inspect and package products for shipment. Offenders are held highly responsible for tools they check out daily. In addition, several employees learn different computer skills and are responsible**

**for daily office functions. All offenders are taught how to make a quality product, the value of showing up to work daily, on time and prepared for work.**

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes**
- b. How many offenders are seen in chronic care clinics? **Approximately 1600 are enrolled in chronic care clinics**
- c. What are some examples of common medical conditions seen in the medical unit?  
**Orthopedic injuries including fractures, gastrointestinal complaints, back pain, chest pain and diabetes.**
- d. What are you doing to provide health education to offenders?  
**Corizon holds an annual health fair for the offenders; there are pamphlets and teaching material that medical staff give to offenders. All patients receive individual counseling either during a nursing sick call, chronic care visit or any medical encounter. There are multiple signs and educational posters throughout the medical department.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain  
**Yes, the aging population has become a big concern. With the lifestyles of the offenders prior to incarceration, the health related issues are more severe. With the aging population living longer in today's society, the medical care necessary to meet those needs is much greater. The issues of the aging, such as mobility, hearing, vision, gastrointestinal issues, and chronic conditions requiring multiple medications must be considered and an individual treatment plan must be developed not only for their health needs, but their continued safety.**

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?  
**When offenders arrive at FCC, they are seen by the transfer/receiving nurse in medical. The nurse provides all offenders with a pamphlet explaining what types of services are offered by mental health and how to access those services. Offenders may file a medical services request form to speak with a mental health counselor. Sometimes Classification or custody staff may refer offenders that have demonstrated changes in behaviors or symptoms of mental illness. Additionally, while offenders are in the administrative segregation housing unit, a qualified mental health professional conducts ad seg rounds. The purpose of the rounds is to find out what the offender's mental health needs are and ensure their needs are addressed.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

**FCC has not had any successful suicide attempts in the past year. However, we had an unsuccessful serious suicide attempt during the past year. Offenders that are placed on suicide watch are seen daily by Mental Health professionals to evaluate the risk of self harm. Additionally once the offender is released from suicide watch, they are seen for a follow up appointment within two weeks. During monthly mental health appointments,**

**offenders are asked if they are having any thoughts of suicide and are assessed for suicide risk each time they are seen by mental health staff. Offenders that are not involved in the mental health clinic and demonstrate signs of depression or suicide are frequently referred to mental health by custody or classification staff.**

**Additionally, Mental Health Staff provide suicide prevention training to DOC employees while they are in annual recertification class. DOC staff are trained on what types of behaviors to watch for and what to do if they suspect an offender may be having thoughts of suicide.**

- c. Approximately how many of the offenders in this institution are taking psychotropic medications?

**At FCC, we have approximately 440 offenders that are prescribed psychotropic medications, 342 of those are in general population or Farmington Treatment Center, 98 are assigned to Social Rehabilitation Unit, and 19 are in the Correctional Treatment Center.**

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

**At FCC, there are approximately 487 offenders in the mental health chronic care clinic. Of those, 338 are living in general population, 50 are assigned to Farmington Treatment Center and 118 of those assigned to the Social Rehabilitation Unit and Correctional Treatment Center. Offenders assigned to Social Rehabilitation Unit or Correctional Treatment Center are typically considered chronically or seriously mentally ill. However, there are offenders who live in general population and FTC who are considered chronically or seriously mentally ill. To give an exact number of how many of those offenders are considered chronically or seriously mentally ill would be a difficult task. Many of the more serious mental illnesses are cyclical. The impact of the mental illness may vary depending on the severity of the symptoms at any given point in time.**

9. What is your greatest challenge in managing this institution?

**Staff issues, followed closely by physical plant and budget constraints are our greatest challenges. The greatest challenge for custody in managing this institution is ensuring the security of the institution and the safety of the staff and offender population is maintained at an acceptable level by providing/assigning custody staff to all areas of the institution 24 hours a day, seven days a week. This is largely affected by custody staff on extended sick leave, light duty requirements, or continued medical problems covered by FMLA. The next greatest challenge is the buildings of the institution, some that are almost 100 years old and require a large amount of maintenance. With the budget restraints it has become increasingly difficult to keep up with the required maintenance in all areas.**

10. What is your greatest asset to assist you in managing this institution?

**The highest quality of staff is our greatest asset. FCC is truly blessed with high quality staff members who have many years of corrections experience. These same staff members**

**have a willingness to mesh with all work sections to reach a common goal. The FCC staff are motivated, conscience, and have strong work ethics.**

11. What is the condition of the facilities' vehicle fleet? (Mileage, old vehicles etc?)

**FCC's Transportation fleet consists of 4 pool vehicles, 5 screened vehicles, 2 property/mail vans, 2 transport vans (1 dog team and the other a 7 passenger), 4 vehicle patrol/hot spot vehicles, and 2 buses for a total of 19 vehicles. All 19 vehicles assigned to the transportation fleet are road worthy and have been mechanically reliable with the standard preventative maintenance done (ie oil changes, wiper blades, tires, etc). Dave Finley, Garage Supervisor is in agreement with this assessment.**

**The remaining vehicles used at FCC are under the direction of the Office of Administration.**

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer)

**Custody staff morale is often spoken of as being low but in reality it depends on when the question is asked. Custody officers complain routinely of disparity in the way they are treated. When asked for specifics they are reluctant to give a straight answer. However it seems there are several factors impacting morale negatively. To get the officers to open up I asked a couple of questions then I asked them to elaborate on their responses.**

**1. On a scale of 1 to 10 where would you rate the morale of the custody staff at FCC? I got answers from 2 to 6 or 7.**

**2. In your opinion, what is the single greatest factor affecting morale? Every officer indicated the lack of raises, reduced insurance, higher premiums and staffing reductions are the foundation for poor morale. Most officers have had their duties increased without as much as a, "Thank you." Officers routinely check other states to see what is happening with their counterparts' benefits. They see better benefits elsewhere and want to know why we can't get an explanation for all of the reductions. The officers feel Central Office and the General Assembly aren't in touch with what is going on in Corrections. There were also individual opinions of why morale is poor:**

**a. Inconsistent or non-existent supervision was next on the list. This area has the greatest impact on morale.**

**(1) The officers I polled complained of supervisors who told them to "just get along" when the employee complained of personal conflicts with co-workers.**

**(2) Officers complained of inconsistent supervision between the Unit Managers and Custody Supervisors.**

**b. Officers feared retaliation or being belittled by supervisors when they would ask a question.**

**c. Officers are angry about late relief. Day after day officers report to their post late and nothing is done.**

**d. Officers complained about the employees who are constantly using unscheduled leave and nothing happens to them.**

**(1) The officers who use the unscheduled leave claim they do it because they don't like their supervisors and they do it to get back at them when in reality they are hurting their co-workers.**

**(2) Officers complained of favoritism when seeking time off.**

**e. Officers complained of supervisors who would sneak around trying to find something wrong rather than tell them how to do it right. This issue was mentioned by almost all of the officers I polled. They are tired of "Getting their necks stepped on".**

**f. Officers complained of being rated in their PERforM by supervisors who had never worked with them and did not know them.**

**g. Officers complained of never getting positive log entries.**

**h. One officer complained that the Major was not connected with his Captains and Lieutenants. He went on to explain that these supervisors act differently when the Major is gone.**

**I believe morale is based on perceived notions rather than the truth in a lot of cases. It doesn't matter what the truth is what matters is what the staff believe to be the truth. I am not denying any of the issues stated above but I can address and try to correct the supervisory issues listed above. The one issue that must be addressed not just at FCC but Department wide is communication. By this I don't mean emails and IOC's but rather face to face speech where both parties talk to each other and listen to each other.**

**13. Caseworkers:**

**A. How many caseworkers are assigned to this institution?**

**31 total Corrections Casemanager I's and Corrections Casemanager II's for DAI and  
3 total Corrections Casemanager III's for DORS**

**\*DAI – Division of Adult Institutions**

**\*\*DORS – Division of Offender Rehabilitative Services**

**B. Do you currently have any caseworker vacancies? Yes 2**

**C. Do the caseworkers accumulate comp-time?**

**Only the DORS CCM III's at straight time.**

**The DORS Casemanager III's who work four, 10-hour work days per week do accumulate compensatory time if a holiday falls on their regular day off during the work week. They are also allowed to use it to take time off. CCM I/II's can (if needed) but are encouraged to use quickly.**

**D. Do the caseworkers at this institution work alternative schedules?**

**Casemanagers work a set schedule each week. DAI Casemanagers work five, 8-hour days, Monday through Friday, and DORS Casemanagers work four, 10-hour days. Staff members modify their schedules to meet institutional needs.**

E. How do inmates gain access to meet with caseworkers?

**Casemanagers have scheduled office hours (2-hours during the morning and another 2-hour period in the afternoon) that they are available to meet with offenders. These times are posted for offender review. The Casemanagers are available either in their office, in the housing unit, or in the Casmanagers office in the classification pod.**

F. Average caseload size per caseworker? **Approximately 110**

- # of disciplinary hearings per month? **Approximately 35 per Casemanager**
- # of IRR's and grievances per month? **25 IRR's and 6 grievances per Casemanager**
- # of transfers written per month? **Approximately 8 per monthly average per Casemanager**
- # of re-classification analysis (RCA's) per month? **Approximately 30 per Casemanager**

Are there any services that you believe caseworkers should be providing, but are not providing?

**No.**

G. If so, what are the barriers that prevent caseworkers from delivering these services?

**Not Applicable**

H. What type of inmate programs/classes are the caseworkers at this institution involved in?

**Re-entry Process, Reception and Orientation, Substance Abuse, Work Release, Restorative Justice, Impact of Crime on Victims, Pathways to Change, Anger Management, and Inside Out Dads.**

I. What other duties are assigned to caseworkers at this institution?

**Compiling offender reports (progress, inter-office communications), maintaining/reviewing offender files, arranging housing assignments, monitoring offender interviews, conducting investigations, developing offender contracts, auditing offender property, conducting safety/security inspections, issuing conduct violations, providing offender instructions, dispensing/reviewing offender forms, processing offender requests, facilitating individual growth (self-help programs, counseling), providing notary services, processing critical illness and death notifications, attend staff meetings, performing special assignments (conducting tours, performing committee work, managing supply inventory, conduct classification hearings, protective custody administrative segregation reviews), and periodically acting as Functional Unit Manager, visiting application processing, office hours, job changes, room changes, coverage of library, searches, coverage of other areas in the institution, training, orientation, trainers and other duties established in IS 1-1.2.**

**14. Institutional Probation and Parole officers:**

A. How many parole officers are assigned to this institution? **9 PO's, 1 POIII**

B. Do you currently have any staff shortages? **Yes**

C. Do the parole officers accumulate comp-time?

**Yes but it is very infrequent and they are encouraged to flex it out during the same week if workload permits.**

D. Do the parole officers at this institution flex their time, work alternative schedules?

**Yes to both with prior approval from supervisor.**

E. How do inmates gain access to meet with parole officers?

**GP officers have "open office" hours at least two times per week so that offenders can come in and ask questions. The office is open for one hour during each of these periods. For those in Administrative Segregation, the officers would go to the housing unit to meet with the offender. For the most part, offenders assigned to the Transitional Housing Unit or treatment programs meet with their officer in those housing units either during open office hours, via a written request to see the officer, or the officer goes on the wing during the offender's free time and answers any questions.**

F. Average caseload size per parole officer?

**This depends on whether assigned a treatment caseload or general population caseload. For GP, the average caseload would be around 400, the THU officer would average 200, and treatment (MoSOP/SOAU and Substance Abuse Treatment) vary between 120 to 230.**

- # of pre-parole hearing reports per month? **50**
- # of community placement reports per month? **85**
- # of investigation requests per month? **150**

G. Are there any services that you believe parole officers should be providing, but are not providing?

**There are not necessarily services they should be providing, but there are services that should have more involvement from the officer, such as re-entry and TAP development.**

H. If so, what are the barriers that prevent officers from delivering these services?

**The main barrier is workload being such that it does not allow time for significant involvement in the above areas.**

I. What type of inmate programs/classes are the parole officers at this institution involved in?

**Treatment officers conduct groups/classes for counselors if they are in need of assistance and workload permits. We have three officers that conduct orientation for treatment inmates on a weekly basis. We have an officer involved in Free and Clean presentations for treatment. Although not a program or class, we have an officer who screens inmates for Project Reach and Release to Rent and insures personal interviews are conducted between the offender and program staff at those facilities. We also have two officers who present a Pre-Release class, two time per month, for offenders nearing release (within two months).**



**We also have two officers involved with/is a sponsor for Puppies for Parole. An officer attends monthly meetings with Mental Health to assist in pre-release planning.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

**The interpretation of FMLA and suspected abuse of its provisions continue to be a struggle for us.**

**The Maintenance positions are now under Office of Administration which continues to create management issues when it comes to managing the Maintenance staff, disciplinary and grievance issue resolutions.**

**There is currently no IT position assigned.**

**The ability to get the aging buildings and grounds repaired due to budget restraints.**

16. Does your institution have saturation housing? If so, how many beds?

**FCC does not have saturated housing at this time. A plan has been submitted to the Division of Adult Institution, Central Office, a few years ago concerning the possible use of saturation housing at FCC, if needed, in the future.**

17. **Radio/Battery Needs:**

- a. What is the number of radios in working condition? **404**
- b. Do you have an adequate supply of batteries with a good life expectancy? **2 batteries per radio (new)**
- c. Are the conditioners/rechargers in good working order? **New radio system (Kenwood) to go into place week of December 1st.**

# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: <b>Fulton Reception and Diagnostic Center</b>				
Custody Level	Maximum		Warden	Billy D. Harris
Total Acreage	132		Address	1393 Highway O
Acreage w/in Perimeter	60			Fulton, MO 65251
Square Footage	437,618		Telephone:	573-592-4040
Year Opened	1986		Fax:	573-592-4073
Operational Capacity/Count (as of November 30, 2012)	1302/1485			
General Population Beds (capacity and count as of November 30, 2012)	N/A		Deputy Warden	Michael B. Payne Offender Management
Segregation Beds (capacity and count as of November 30, 2012)	122/96		Deputy Warden	Dan Redington Operations
Treatment Beds (capacity and count as of November 30, 2012)	38/22		Asst. Warden	Shawn Twyman
Work Cadre Beds (capacity and count as of November 30, 2012)	200/189		Asst. Warden	N/A
Diagnostic Beds (capacity and count as of November 30, 2012)	1064/1178		Major	Scott Colter
Protective Custody Beds (capacity and count as of November 30, 2012)	N/A			

### **1. Capital Improvement Needs**

**a. How would you rate the overall condition of the physical plant of the institution?**

*The overall condition of the physical plant is fair.*

**b. What capital improvement projects do you foresee at this facility over the next six years?**

Replace all twenty-five (25) Backflow Preventers and include a Pressure Reducing valve.  
*The Variable Facility Assessment (VFA) does not cover this. Due to the high water pressure the city is now providing and the fact that the Backflow Preventers are 20+ years old this needs to be completed in the very near future. FRDC has had to work on many of the backflows over the last five (5) years and it keeps looking worse as time goes by.*

Replace roofs on Housing Units 6 and 7 along with the two heat pumps and Housing Unit 18 roof top exhaust fans. This is covered by a number of VFA requirements. The cost for replacing HU 1, 2 and 3 was \$701,000.00; project C0616-0. HU 6 and 7 are being considered for replacement at this time. The C-Building roof also needs to be replaced.

Pave existing roads and lots with new asphalt. This is not covered by VFA. Due to all of the changes over the years our road and parking areas have taken a beating. Our existing asphalt paving needs repair and resurfacing. The gravel lots added need pavement applied. All new pavements will require proper striping.

Replace Window Operators and weather stripping in all of Phase I and about 30% of Phase II. This is covered by a number of VFA requirements. A gearbox operates the existing windows. The gears are worn out and the windows require manual removal of the screens and physically positioning the windows in their desired location. The windows all require new weather stripping.

Replace Windows in Control Bubbles (outside) and (Floor). This is covered by a number of VFA requirements. These windows are old and in poor condition. The officers have a very difficult time in viewing anything occurring on the other side. The windows are currently being replaced by a priority list as time and material allow.

Install Seamless wall covering on ALL HU Showers. This is covered by a number of VFA requirements. These showers are of concrete block (filled) construction and then painted. The paint has never bonded to the walls no matter what we have tried. The only solution we have been given is to apply some kind of a seamless covering like stainless or one of these new age products.

Replace Emergency Switch Gear-Electronics. This is covered by VFA requirements. The electronic controls and the main switch are over 20 years old and have had many repairs and adjustments made to it. The time has come to replace with a new up to date model.

Replace PMTN-2 with a New 1500 KW Transformer. This is not covered by VFA. This is our most important transformer for it controls all emergency power, the kitchen, and our boiler room, HU17 & HU18. The load on this unit has increased each time we have made an addition to the point it is reaching 90% load. We have had to repair this unit due to a lightning strike blowing one of the protecting resistors. The safe play would be to correct or organize all of these issues.

Replace 3 Boilers. This is not covered by VFA. The 3 package boilers rated @ 6.25 Million BTU are nearing their life expectancy. We need to have something included to cover this issue. All of our inspections are showing only normal wear and tear but these are 1985 model Clever Brook's boilers, which only have a 25-30 year life.

Repair Roof on HU-17 & 18 plus Multipurpose Building. This is not covered by VFA. These buildings roofs have leaked on and off since built in 1995. The specs were supposed to be for a standing seam roof but we got a screwed down instead. We need to replace or apply one of those new spray-on products to seal all screw penetrations.

*Upgrade computer system in the Control Center and HU 20. Components are no longer available for the DOS based system. Total cost approximates \$150,000. All housing units and Administration outside slider doors need to be retrofitted as parts are becoming less available and the doors are original. There are twenty (20) doors at a cost of approximately \$20,000 each.*

**c. How critical do you believe those projects are to the long-term sustainability of this facility?**

*Most all mentioned projects are critical to the long term sustainability of the facility. The HU 5 roof was replaced this year. HU 6 and 7 are at the end of their life expectancy with many leaks. We are told that replacing the roofs on HU 6 and 7, along with equipment is on the schedule of OA roofs for the 2012 and 2013 cycle; again, budget and renovate 64 showers with some kind of seamless covering for sanitation reasons this must be a capitol improvement project. Replacing the Emergency switch gear-electronics and the replacement of PMTN-2 transformer are critical and need to be capitol improvement projects. Repairing the roofs on HU-17 & 18 along with the multipurpose building, need to be a capitol improvement project. Replacing the 3 boilers and the building will most likely need replacing in 6-8 years. The window operators are an inconvenience to operations and drive up the utility costs allowing air infiltration.*

**\*\*\*Our most critical issues are the HU roof replacements. The computer system upgrade should be considered a high priority with the roof repairs.\*\*\***

**2. Staffing**

**a. Do you have any critical staff shortages?**

*Currently we have one Corrections Case Manager I/II, eight Corrections Officer I, three Corrections Officer II, one Office Support Assistant-Keyboarding, one Academic Teacher and one Guidance Counselor positions that are vacant. We have one Corrections Officer I employee who is on extended military leave.*

**b. What is your average vacancy rate for all staff and for custody staff only?**

*Our current rate is 3.9% for custody staff. The average vacancy rate for all staff is approximately 3.8%. Due to the current economy, we have been able to keep most positions filled.*

**c. Does staff accrual or usage of comp-time by staff affect your management of the institution?**

*Overtime accrual and usage has always affected the operation of the institution. Balancing the number of staff needed against the staff taking comp-time off, as well as how many staff will be absent for various reasons while maintaining a safe staffing level 24 hours per day, 7 days per week.*

**d. What is the process for assigning overtime to staff?**

*Officers are placed on a list that starts with the lowest seniority and whenever anyone is needed, a request for volunteers is announced. If no one volunteers, the officer at the top of the list is mandated to work. Whenever they work two hours or more they are moved back to the bottom of the list. We have recently started a list for employees to sign up who are willing to work overtime.*

**e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?**

*Approximately 65% of accrued comp-time is used as time off. Throughout the year, there are approximately 2% of custody officers that request a comp time payout.*

**NOTE:** *Every attempt is made to “flex off” any overtime worked in that same week to avoid comp-time accrual.*

**f. Is staff able to utilize accrued comp-time when they choose?**

*We have been able to allow staff to utilize time off when requested the majority of the time.*

**3. Education Services**

**a. How many (and %) of inmate students at this institution are currently enrolled in school?**

*Currently no (0%) inmate students at this institution are enrolled in school because we do not have a DOC school at FRDC. We administer the Wide Range Achievement Test to offenders at FRDC. Educational services at FRDC are dedicated to diagnostic processing. The resulting reading and math levels assist the DOC schools in working with offenders. The availability of information on an offender's educational ability is useful to other sections doing programs with offenders. Offenders under age 22 are screened and tested for eligibility for special education services in accordance with state and federal regulation. Verification of high school diplomas or GED is accomplished as often as possible by Diagnostic Education staff. We are currently implementing a program to allow offenders who score at a tenth grade or above grade level on the screening testing to embark on a GED self study program. The Education staff checks out a Study Guide book to the offender and provides support while they work on their weak academic areas. Once the Education staff and offender determine readiness GED pretests are administered. This information is forwarded to the offender's permanent camp so that they will be ready to take their GED test as soon as possible after transfer from the diagnostic facility. To date this has affected only about 1%, but we have only begun in the past few months.*

**b. How many (and %) of inmate students earn their GED each year in this institution?**

*GED classes are not offered at the diagnostic center.*

- c. **What are some of the problems faced by offenders who enroll in education programs?**

*Offenders working in the Education area at FRDC usually express concerns with the length of time since they last attended any regular schooling.*

**4. Substance Abuse Services**

- a. **What substance abuse treatment or education programs does this institution have?**

*The Parole Return Relapse Program (PRRP):* This is a 30-day program for parole return status offenders who have previously completed a longer DOC treatment program (12 weeks, 6 months, 12 months) within the last three years. The curriculum includes relapse prevention, criminal thinking intervention, Pathways to Change when possible (difficult due to short length of program), and some Impact of Crime on Victims classes. Starting August 01, 2007, staff began utilizing the Re-Entry process and computer system (TAP) for developing treatment goals for the offenders. Other Re-Entry services provided are some aftercare and career center appointments set up prior to release. A presentation by the Division of Workforce Development on services and programs available in the community used to be given monthly and is also offered to the Perm Cadre. This program started in December of 2003.

*The Ambulatory Restriction Mobility (ARM) Institutional Treatment Center Program:* This is a 12-week short-term treatment program that specializes in services for offenders with medical and/or ambulatory restrictions that pose problems or cause difficulties at other sites. The curriculum includes Living in Balance; an evidenced based program, relapse prevention, criminal thinking intervention, Pathway to Change, some Impact of Crime on Victims classes, groups for specialized issues and individual counseling. Starting August 01, 2007, staff began utilizing the Re-Entry process and computer system (TAP) for developing treatment goals for the offenders. Other Re-Entry services provided are some aftercare and career center appointments set up prior to release and a presentation by the Division of Workforce Development on services and programs available in the community. This program started in November 2006.

*The Addiction Severity Index Unit:* This unit conducts assessments on offenders who are received at the diagnostic center that are stipulated to participate in a treatment program by the court system or parole board. In addition to conducting the assessment, the unit provides a summary report, as well as assigning a classification score (ICA-SA) that indicates what level of treatment would be most beneficial to the offender based on his needs. This information is then used by diagnostic center staff to select an appropriate treatment program, and by the staff at the treatment center to assist in developing the offender's treatment goals.

- b. **How many beds are allocated to those programs?**

*PRRP has 23 beds*

*ARM has up to 15 beds*

*ASI Unit: Offenders called out from R&O population wherever they are assigned.*

**c. How many offenders do those programs serve each year?**

*PRRP has the capability of serving approximately 360 offenders per year.*

*ARM has the capability of serving approximately 60 offenders per year.*

*ASI Unit, can conduct approximately 35 assessments per week, which would be 1,820 assessments per year.*

**d. What percent of offenders successfully complete those programs?**

*PRRP has an extremely low termination rate. The success rate was calculated for FY'10 for this program at 99%.*

*ARM for the FY'11 has had a 98% completion rate.*

**e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?**

*For these programs to operate successfully, it takes cooperation between staff from the divisions of DORS, DAI and P&P. At this site, this collaboration has been a tremendous*

*success. Since this is a diagnostic center, the schedule for the offenders is more restrictive than it would be at a mainline site; however, even that has not been an obstacle for the programs. The biggest challenge in my opinion is working within the daily time constraints regarding offenders going to medical, counts clearing, etc.*

**5. Vocational Programs**

**a. What types of vocational education programs are offered at this institution?**

*We offer no (vocational) Career and Technical programs at FRDC due to being a diagnostic center. We do have the Work Essential Skills program in the Library available to the Permanent Cadre Offenders. This is a video based program.*

**b. How many offenders (and %) participate in these programs each year?**

*The Work Essential Skills is a self-study program and statistics are not maintained.*

**c. Do the programs lead to the award of a certificate?**

*N/A*

**d. Do you offer any training related to computer skills?**

*No*

**6. Missouri Vocational Enterprises**

**a. What products are manufactured at this institution?**

*FRDC does not have a Missouri Vocational Enterprise.*

**b. How many (and %) of offenders work for MVE at this site?**

*N/A*

**c. Who are the customers for those products?**

*N/A*

**d. What skills are the offenders gaining to help them when released back to the community?**

*N/A*

**7. Medical Health Services**

**a. Is the facility accredited by the National Commission on Correctional Health Care?**

*Yes, FRDC received certificate of re-accreditation in February 2010. Preparation is well underway for a re-audit in January 2013.*

**b. How many offenders are seen in chronic care clinics?**

*Approximately 300 offenders are seen each month by each, the nurse and physician, for chronic care clinic appointments. Many are seen in addition to their scheduled chronic care visit for follow-up appointments specific to their need, i.e. blood sugar or pressure. There are approximately 800 duplicate/500 unduplicated clinic enrollments in 16 clinics.*

**c. What are some examples of common medical conditions seen in the medical unit?**

*Patients with complaint of back pain/problems, abscesses, headaches, rashes, allergies and high or uncontrolled hypertension are commonly seen in the medical unit.*

**d. What are you doing to provide health education to offenders?**

*Education continues to be provided at clinic encounters and on the internal television channel. Offenders receive verbal instruction during nurse and physician sick call; handouts are readily available with specific education through nurse sick call. In addition, education specific to chronic diseases is given through chronic care clinics. An annual health fair is held for the perm cadre and, this year, included offenders from the substance abuse program. Multi-disciplinary health fair topics included body mass index, blood pressure checks, blood glucose checks, vision screening, hand washing, smoking cessation, self-testicular exam, sexually transmitted disease, MRSA, HIV,*



*rhabdomyelosis, mental health, food service, recreation and substance abuse. Pre- and post-test counseling is also given to offenders receiving HIV (entrance, exit, mandatory or voluntary) lab tests.*

- e. **Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?**

*No active cases.*

- f. **Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.**

*Yes. We are seeing an older population of offenders. It is making an impact on our healthcare system by requiring more nursing and doctor visits, more infirmary days and more medication. In addition we have increased need for medical restrictions for bottom bunk/bottom walk, and assistive devices such as wheelchairs, walkers and canes. It also affects our out counts to specialists. We are finding our population in general has more health issues.*

## 8. **Mental Health Services**

- a. **How do offenders go about obtaining mental health treatment services?**

*On the first day of arrival, any offender with current psychotropic medication and/or concerning presentation is sent to the multipurpose building to speak with a MHM qualified mental health professional in order to gather more detailed information regarding their mental health need. Offenders with current psychotropic medication are also interviewed by the mental health nurse who works with the psychiatrist to ensure medication bridge orders are made. All other offenders are interviewed by a MHM qualified mental health professional on the second day they arrive regarding their mental health background. During all mental health intake interviews, the offender is educated about the Medical Services Request (MSR) form and informed that they may use the MSR to access mental health services. They are also provided with a flyer, which details the MSR process, mental health groups available, relaxation techniques, anger management tips, and suicide prevention in prison.*

- b. **How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?**

*There have been no completed suicides in 2012. Mental health staff continue to recommend that offenders not be single celled when an offender is removed from close observation or suicide watch, unless clinically contraindicated. The segregation unit staff has worked to follow these recommendations. Suicide prevention is taught at Basic Training and at Core Training for all officers. MHM developed a suicide prevention training module, which continues to be used to train officers throughout MODOC. FRDC custody staff works collaboratively with mental health staff to immediately identify anyone with mental health concerns and crisis referrals are made when needed. FRDC also has a court return initiative in which any offender who is taken out to court is*

*brought to the mental health offices upon their return and they are seen by a qualified mental health professional.*

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?**

*During the last month (October 2012) there was 15% of the population on psychotropic medications.*

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?**

*The number of chronically/seriously mentally ill offenders fluctuates. Currently there are eight offenders who are classified as Mental Health 4 or above. FRDC has procedures in place to house offenders on involuntary medication status. Currently, there are no offenders on this status. Mental Health psycho educational groups have become very popular at FRDC. Currently FRDC offers Coping with Stress (two sections), Aftercare/Planning for a Better Life (two sections) and Anger Management. MHM staff trained several classification staff in Anger Management and those staff will provide the fourteen-week Anger Management program to the perm cadre at FRDC.*

- 9. What is your greatest challenge in managing this institution?**

*The greatest challenge to managing FRDC rests in the complexity of being a diagnostic center. FRDC has no control of the volume of offenders that arrive at the facility. When FRDC is at capacity the county jails can continue to bring offenders to the institution. FRDC must manage these bed space challenges by ensuring constitutional conditions are being met with the existing resources available. In addition, FRDC is often challenged with offenders being received from the counties with health conditions that must be addressed at FRDC such as TB, scabies, flu, etc. FRDC must properly assess, classify and assign adult male offenders while maintaining safe, secure and constitutional conditions. FRDC bed capacity is 1,302 with an average offender population of 1,500.*

- 10. What is your greatest asset to assist you in managing this institution?**

*The greatest asset to FRDC is the staff. Staff at FRDC is professional, trained, experienced and equipped to perform their specialty functions. FRDC has many staff with years of experience doing various jobs. This helps eliminate many issues that arise due to their experience.*

- 11. What is the condition of the facilities' vehicle fleet? (Mileage, old vehicles etc?)**

*All are good with the exception of the following: 13-0218M and 13-0219M are 1995 15-passenger Dodge vans with 85,529 miles and 69,140 miles respectfully. Both of these vans are in poor condition with the doors being worn out and falling off, the bodies are in great need of work. The truck we use to deliver food to the two satellite locations CSC and CTCC is worn out. Maintenance has 4 vehicles, which are original start-up from 1986. They are 13-0207M Chevy pick-up with 42,846 miles, and 10-301 GMC 7000 Dump truck with 21,292 miles. Perimeter*

*Vehicles; 13-0491 with 151,182 miles and 13-0542 with 147,297 miles are in poor shape. We received three patrol vehicles, 13-0712, 13-0210 and 13-0029 with approximately 74,000 miles each, putting the offender transportation vehicles in good shape. Maintenance vehicles 13-0208M and 13-0211M have been surplused. All remaining fleet vehicles are in usable condition at this time*

10-0301 - very poor condition

13-0214 – very poor condition

13-0491 – has 195,064 miles and is in poor condition

13-0542 – has 181,468 miles and is out of service due to lightening strike.

13-0220 – 1994 Chevrolet 3500 was surplused about one year ago.

13-0217 – is a 1995 15-passenger van. The body is in poor condition and has 95,567 miles.

The maintenance vehicle 13-0207 is a 1986 Chevy ¾ ton pickup used for snow removal. It along with its spreader and snow blade are in very poor condition. It needs to be replaced as soon as possible to provide adequate snow removal services. 13-0214 is a 1986 GMC 2-ton dump truck used for snow removal. It is in very poor condition as well. Both trucks are in need of costly repairs to even pass inspection.

**12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.**

*The overall morale of the custody staff at this institution at this time is low. At a reception/diagnostic center the staff turnover is higher than at mainline institutions. Both Custody and non-custody have had higher insurance premiums to contend with in an economy which is recovering very slowly. Over the last four years insurance costs have went up every year except one. During the same four years, state workers have received on a two percent raise. Many Custody staff must work additional part time jobs to make ends meet. The State of Missouri in general, has the lowest paid state work force in the nation. Higher food costs and gasoline prices severally impact low paid staff members.*

**13. Caseworkers**

**a. How many caseworkers are assigned to this institution?**

*Case Manager II = 17*

*Corrections Classification Assistant = 2*

*Case Manager III = 2*

*Functional Unit Manager = 3*

**b. Do you currently have any caseworker vacancies?**

*Yes, we have one Case Manager II position reallocated to FRDC through attrition.*

**c. Do the caseworkers accumulate comp-time?**

*No*

**d. Do the caseworkers at this institution work alternative schedules?**

*No*

**e. How do inmates gain access to meet with caseworkers?**

*The offenders can write a note and send it through the institutional mail. There are also Classification and Assignment staff assigned to the housing units that make daily rounds on the unit, allowing the offenders time to speak with them as well.*

**f. Average caseload size per caseworker?**

*The average caseload for the Diagnostic Case Manager will vary depending upon our intake. The classification staff assigned to our R&O units will have a caseload from 300 to 600 offenders depending upon the number of houses that they cover. Our perm cadre units do have Classification Case Manager assigned, and their caseload is 100 offenders.*

- *# of disciplinary hearings per month? Average 85.3*
- *# of IRR's and grievances per month? Average 4.6*
- *# of transfers written per month? Average 23.3 (Perm Unit)*
- *# of reclassification analysis (RCA's) per month? Average 20.3*

**g. Are there any services that you believe caseworkers should be providing, but are not providing?**

*No*

**h. If so, what are the barriers that prevent caseworkers from delivering these services?**

*We feel we are providing all necessary services.*

**i. What type of inmate programs/classes are the caseworkers at this institution involved in?**

*FRDC is committed to Reentry and offers the following programs to assist in offenders' reintegration into society; Anger Management, Parenting Classes, Pathways to Change, Life Skills, Purpose Driven Life, and Restorative Justice.*

**j. What other duties are assigned to caseworkers at this institution?**

*Diagnostic services, taking DNA, new offender orientation and other services as needed.*

14. **Institutional Probation And Parole Officers**

a. **How many parole officers are assigned to this institution?**

*PO I and PO II = 11  
PO III (Supervisory Position) = 1*

b. **Do you currently have any staff shortages?**

*Yes*

c. **Do the parole officers accumulate comp-time?**

*Yes*

d. **Do the parole officers at this institution flex their time, work alternative schedules?**

*Yes*

e. **How do inmates gain access to meet with parole officers?**

*For probation and parole related issues, P&P staff call the offender to the P&P office, or the offender can send a 'kite' to this office if he has questions or concerns, and we have open door for the perm units one time monthly.*

f. **Average caseload size per parole officer?**

*The caseload size fluctuates monthly depending on offender status.  
# of Parole Hearing reports per month? Average 76 (761 as of November 2012)  
# of Community Placement reports per month? 1(11 as of November 2012)  
# of Investigation Requests per month? 59 (587 as of November 2012)  
# of Sign-Outs per month? 82 (816 as of November 2012)*

g. **Are there any services that you believe parole officers should be providing, but are not providing?**

*Yes, if we had adequate staff, I feel the P&P office could offer a pre-release group and be involved in Orientation and MRP.*

h. **If so, what are the barriers that prevent officers from delivering these services?**

*We do not have adequate staff to provide groups due to our workloads.*

i. **What type of inmate programs/classes are the parole officers at this institution involved in?**

*Friends and Family*

15. **Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.**

*Our vehicle fleet is beginning to have an increase in issues with our fleet vehicle conditions, vehicles equipped for specialty needs and busses. Vehicle mileage should not be the only criteria for assessing the needs for replacement. Our fleet vehicles create a safety issue for staff members who are transporting offenders.*

16. **Does your institution have saturation housing? If so, how many beds?**

*FRDC does have an official saturation housing capacity of 258 beds.*

17. **Radio/Battery Needs:**

- a. **What is the number of radios in working condition?**

*FRDC recently upgraded the communications system and all radios are in current working order.*

- b. **Do you have an adequate supply of batteries with a good life expectancy?**

*At this time yes, the battery life is approximately two years.*

- c. **Are the conditioners/rechargers in good working order?**

*All are in good working order.*

# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: <b>Jefferson City Correctional Center</b>				
Custody Level	5		Warden	Jeff Norman
Total Acreage	130		Address	8200 No More Victims Road; Jefferson City, MO
Acreage w/in Perimeter	40			
Square Footage	750,000		Telephone:	573-751-3224
Year Opened	2004		Fax:	573-751-0355
Operational Capacity/Count (as of November 30, 2012)	1971 / 1969			
General Population Beds (capacity and count as of November 30, 2012)	1152 / 1152		Deputy Warden	Kelly Morriss – Offender Management
Segregation Beds (capacity and count as of November 30, 2012)	459 / 484		Deputy Warden	Donna Cayer - Operations
Treatment Beds (capacity and count as of November 30, 2012)	288 / 287		Asst. Warden	Billy Dunbar
Work Cadre Beds (capacity and count as of November 30, 2012)	0 / 0		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	0 / 0		Major	Timothy Goebel
Protective Custody Beds (capacity and count as of November 30, 2012)	72 / 46			

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution? *Good.*
- b. What capital improvement projects do you foresee at this facility over the next six years?  
*Security electronics, (Delnorte Fence, cameras, Housing Unit intercoms) sally port gates operators, laundry equipment, food service equipment, asphalt road repair, institutional lighting.*
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
*Critical to the overall operation and energy efficiency.*

### **2. Staffing:**

- a. Do you have any critical staff shortages? *Yes, Cook II and Corrections Officer I.*
- b. What is your average vacancy rate for all staff and for custody staff only? *Our average vacancy rate is 19.8% with the bulk of this being our Corrections Officer I position which has a turnover rate of 22.2%.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
*Yes.*
- d. What is the process for assigning overtime to staff? *Primarily volunteer.*

- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? *50%*
- f. Is staff able to utilize accrued comp-time when they choose? *Not always, but to the extent possible.*

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school? *95 offenders enrolled in the GED program (6% of our general population). Note: JCCC operates a volunteer education program which includes ABE/GED classes. The education program at JCCC transitioned to a volunteer education program in 2005 when budget cuts re-directed funding to lower level facility education programs.*
- b. How many (and %) of inmate students earn their GED each year in this institution? *15 – 25 offenders (1 – 2 %) in the program will earn their GED within this calendar year.*
- c. What are some of the problems faced by offenders who enroll in education programs? *Maintaining well qualified tutors has been a problem. The pay for offenders performing skilled positions in other jobs makes it difficult to recruit and maintain qualified education tutors which decreased the graduation rate and the number of offenders that are able to enroll and attend school or become frustrated being placed on a waiting list or quit school altogether. Much of the material used in the education department originated prior to the funded education closing. Many of the sets of books are incomplete. The tutors do their best to fill in the informational gaps with other related materials and resources.*

**4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have? *We have a therapeutic community for drug and alcohol abuse. Note: JCCC is operating a drug and alcohol program utilizing primarily volunteers. We have one drug counselor. We lost 10 staff to budget cuts on 2005.*
- b. How many beds are allocated to those programs? *242 beds*
- c. How many offenders do those programs serve each year? *144 – 150 offenders*
- d. What percent of offenders successfully complete those programs? *20%*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? *Conflicts with custody priorities and shortage of counselors.*

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? *None*
- b. How many offenders (and %) participate in these programs each year? *None*
- c. Do the programs lead to the award of a certificate? *N/A*
- d. Do you offer any training related to computer skills? *N/A*

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution? *Furniture, Clothing, License Plates, Stickers, Engraved Items and Recycled Ink Cartridges.*
- b. How many (and %) of offenders work for MVE at this site? *300 offenders – 15%*
- c. Who are the customers for those products? *State agencies, cities and local government, schools and non-profit agencies.*
- d. What skills are the offenders gaining to help them when released back to the community? *Good work habits, skills at operating machinery and computers.*

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? *Yes*
- b. How many offenders are seen in chronic care clinics? *1776*



- c. What are some examples of common medical conditions seen in the medical unit? *Of our average population of 1970 offenders, we have 1776 enrollees in chronic care clinics. The chronically ill offenders are evaluated on a routine schedule ranging from one (1) to six (6) months based on the primary diagnosis of the patient. Patients can be evaluated on a more frequent basis, if their condition indicates the need. In addition to the established chronic care clinics, the facility has instituted and manages several specialty clinics (the chronic care figure noted above does not include the specialty clinics):*
- *Oral Surgery Clinic – We have been very fortunate to partnership with an oral surgeon who performs complex oral surgery procedures onsite approximately once per month.*
  - *Liver Biopsy Clinic – With the partnership of a surgeon, liver biopsies are performed onsite with post-operative recovery in the infirmary. The biopsies are performed under ultrasound guidance.*
  - *Ultrasound – With the partnership of Global Diagnostic we are being afforded the opportunity to perform ultrasounds onsite to those offenders with an approved referral.*
  - *GI Studies Clinic – The facility utilizes the most current technology for gastrointestinal studies, the PillCam – an ingestible camera that is swallowed and provides video of the esophagus or small bowel onsite. The procedure is performed onsite with pre follow-up in the Infirmary.*
    - *In 2012 we also implemented the service of endoscopy and colonoscopy. A General Surgeon and contracted services comes on-site and performs the procedures as an outpatient clinic.*
  - *Cancer Center of excellence – The facility Infirmary has become a receiving and management center for male patients on chemotherapy and radiation therapy programs in the community.*
  - *Telemedicine – We have partnered with SKC and St. Luke's Hospital in order to provide telemedicine services onsite. The opportunity will provide a specialist consult and care via satellite to those offenders who present a need. Recently telemedicine equipment has been installed at the local Surgery Center to provide the opportunity for the surgeon/specialist to provide follow-up care via telemedicine. We provide pain management clinics as well as pre-op and post-op clinics for general surgery, and orthopedics.*
- d. What are you doing to provide health education to offenders? *Education is provided during all reception and orientation encounters. Complaint specific education is provided at the time of every clinical encounter: sick call, chronic care clinics, emergencies, specialty clinics, periodic physical assessments or any other time that a health care professional interacts with a patient to provide clinical care. This education is provided in written and/or verbal format. Additionally, the facility conducts an annual offender health fair during which many topics are discussed and handouts are provided concerning most chronic care conditions. Additional educational materials are available for review in the library.*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? *No.*
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. *Yes, and probably on an even larger scale. Due to long term high risk life styles of most offenders and the lack of seeking community healthcare, there is expected to be a greater concentration of medical pathology and its sequel that one would find in the general public. Some examples would be long term*

*smoking and its affect on the vascular system and associated carcinomas and chronic obstructive pulmonary disease, untreated hypertension, uncontrolled diabetes, undiagnosed chronic active hepatitis B and C, undiagnosed or under-treated HIV infections, etc. Some problems arise from the aging process, with or without the chronic medical complications; decreasing ability to perform activities of daily living, higher incidents of confusion or dementia and decreasing mobility.*

**8. Mental Health Services:**

- a. *How do offenders go about obtaining mental health treatment services? Offenders may access mental health services through the Medical Services Referral (MSR) form and process. An offender may also be referred to mental health via a Staff Referral Form. Offender may request to participate in group therapies verbally with mental health staff or by sending an MSR indicating a desire to participate.*
- b. *How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? There were no completed suicides in the past year. Suicide intervention training is provided at CORE Training an average of two times per month to JCCC staff by the Institutional Chief of Mental Health Services. All employees are able to initiate suicide intervention policy and procedures.*
- c. *Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? There are approximately 303 (15.6%) of offenders in this institution that are currently taking psychotropic medications.*
- d. *How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? Of the offenders receiving psychotropic medications, 65 are rated as MH-4. Offenders with either MH-3 or MH-4 scores are scheduled for Chronic Care with Mental Health Therapists and Psychiatrists. By policy each is seen by the Mental Health Therapist a minimum of once each 30 days and by the psychiatrist a minimum of once each 90 days. Each MH-3 or MH-4 offender participates in developing an Individualized Treatment Plan with input from the multidisciplinary treatment team. Currently 35 offenders participate in the "SSRU" Secure Social Rehabilitation Unit. These offenders are all MH-4. It was envisioned and designed to provide clinically appropriate mental health treatment and programming to high custody level offenders who experience serious mental illness. It was determined that there were a number of seriously mentally ill offenders housed in the segregation units as a result of their behaviors primarily associated with their particular mental illness. The SSRU establishes a setting where treatment and programming is provided with the goal of moving these offenders to a more appropriate and less restrictive environment. This move to a less restrictive environment is managed on a level system which negotiates a continuum from segregation type placement on one end to a return to general population placement on the other. This level system allows movement in either direction individually determined by each particular offender's progress in the programming, his behavior and his particular needs. Offenders with a MH score of MH-1 or MH-2 are seen by therapist via the MSR process. All offenders are welcome to participate in mental health therapeutic group therapies.*

9. *What is your greatest challenge in managing this institution? Staffing due to turnover. We have a considerable amount of staff at or close to retirement. The loss of knowledge and experience these seasoned staff members have is not easily made up. Our Training Officer and Field Training or Mentoring Program is attempting to fill the void. The lack of experienced staff requires a higher amount of supervision, creating a higher work load for Management Staff and taking them away from their assigned duties.*

10. What is your greatest asset to assist you in managing this institution? *Our staff, their experience and work ethic.*
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) *Aging but well maintained, we could use another wheelchair van.*
12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. *Morale is medium to high. The staff work well together with minimal staff conflict. The staff at JCCC have a great work ethic and work well together. They are very proud of working at JCCC due to the numerous offender rehabilitative programs, substantive offender jobs, challenging work environment and experienced personnel.*

**13. Caseworkers:**

- A. How many caseworkers are assigned to this institution? *We currently have 17 casemanager positions. 15 work in housing units, one is assigned specifically to respond to grievances (the next stage after Informal Resolution Request) and one assigned as our Restorative Justice Coordinator.*
- B. Do you currently have any caseworker vacancies? *Yes (2).*
- C. Do the caseworkers accumulate comp-time? *Rarely, if ever, and only in cases of emergencies.*
- D. Do the caseworkers at this institution work alternative schedules? *Occasionally, in order to avoid accumulation of comp time.*
- E. How do inmates gain access to meet with caseworkers? *Casemanagers make rounds of the administrative segregation and protective custody unit a minimum of two times a week and in general population we have open door daily. We also call offenders in when they send a written request through the housing unit inside mailbox as the need arises.*
- E. Average caseload size per caseworker?
- # of disciplinary hearings per month? *Approximately 14 hearings.*
  - # of IRR's and grievances per month? *Approximately 15 IRR's per month and the caseworker in the grievance office responds to approximately 175 grievances per month.*
  - # of transfers written per month? *Approximately 1 per month per caseworker (due in large part to the fact that we have long-term sentenced offenders).*
  - # of re-classification analysis (RCA's) per month? *Approximately 8 per month per caseworker.*
- F. Are there any services that you believe caseworkers should be providing, but are not providing? *None.*
- G. If so, what are the barriers that prevent caseworkers from delivering these services? *N/A*
- H. What type of inmate programs/classes are the caseworkers at this institution involved in? *The reception/orientation program, the substance abuse programming housing unit, the visiting room activities committee, the food visit program, administrative segregation reentry program, anger management classes, pathways to change, restorative justice, impact on crime classes.*
- I. What other duties are assigned to caseworkers at this institution? *Institutional tours for youthful offenders/probationers and professional tours; training of custody and non-custody staff on "Report Writing"; "Adult Internal Classification System" and the Transitional Accountability Plan; serves as a committee member on administrative segregation committee, protective custody hearings, enhanced care unit committee, forced medication hearings.*

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? *Three parole officers and one supervisor.*

- B. Do you currently have any staff shortages? *No*
- C. Do the parole officers accumulate comp-time? *No*
- D. Do the parole officers at this institution flex their time, work alternative schedules? *Yes*
- E. How do inmates gain access to meet with parole officers? *Inmates gain access by letters, phone calls, interviews, open door and by parole officers visiting housing units.*
- F. Average caseload size per parole officer?
  - # of pre-parole hearing reports per month? *30 per month*
  - # of community placement reports per month? *10 per month*
  - # of investigation requests per month? *15 per month*
- G. Are there any services that you believe parole officers should be providing, but are not providing? *No*
- H. If so, what are the barriers that prevent officers from delivering these services? *No*
- I. What type of inmate programs/classes are the parole officers at this institution involved in?  
*Parole Officers are involved with a long-term drug program, youth group program and pre-release planning.*

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. *None*

16. Does your institution have saturation housing? If so, how many beds? *No*

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? *500 radios*
- b. Do you have an adequate supply of batteries with a good life expectancy? *Yes*
- c. Are the conditioners/rechargers in good working order? *Yes*

**Joint Committee on Corrections**

**Information for Legislative Institutional Visits**

Facility Name: <b>Maryville Treatment Center</b>				
Custody Level	C-2		Warden	Sonny Collins
Total Acreage	44 acres		Address	30227 US Hwy 136
Acreage w/in Perimeter	12 acres			Maryville MO 64468
Square Footage	137,000		Telephone:	(660) 582-6542
Year Opened	1996		Fax:	(660) 582-8071
Operational Capacity/Count (as of Nov 30, 2012)	525/518			
General Population Beds (capacity and count)	525/516		Deputy Warden	Alana Boyles Offender Management
Segregation Beds (capacity and count)	34/10		Deputy Warden	Gaye Colborn Operations
Treatment Beds (capacity and count)	525/516		Asst. Supt	N/A
Work Cadre Beds (capacity count)	0		Asst. Supt	N/A
Diagnostic Beds (capacity and count)	0		Major	John Lower
Protective Custody Beds (capacity and count)	0			

1. **Capital Improvement Needs:**

a. How would you rate the overall condition of the physical plant of the institution? **Good**

b. What capital improvement projects do you foresee at this facility over the next six years?

1. **Replace windows in Bldgs 2 & 3**

2. **Tuck Point Bldgs 3, 4 & 5**

3. **Update security fence alarm system, along with locks at the Control Center**

4. **Update Bldg 2 cooling system**

5. **Repair roof on Bldg 2**

6. **Upgrade showers in Bldgs 2 & 3 – C-side**

7. **Replace steam line loop in Bldg 3**

8. **Replace all vehicles above 100,000 miles with more efficient types**

9. **Inspection of water tower – repaint inside and out**

10. **Repave all parking lots**

11. **Build a warehouse for maintenance tools and inventory**

c. How critical do you believe those projects are to the long-term sustainability of this facility?  
**The windows in Bldg 2 and 3 and the tuck pointing are very critical and are in need of immediate repair. It is also critical that the offender transportation vehicles over 200,000 miles be replaced.**
2. **Staffing:**

a. Do you have any critical staff shortages? **Cook I/II**

b. What is your average vacancy rate for all staff **(5.83)** and for custody staff **(3.58)** only?

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
**No**

d. What is the process for assigning overtime to staff? **Volunteer basis**

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off **(57%)** and what percentage is paid-off? **(43%)**

f. Is staff able to utilize accrued comp-time when they choose? **Yes, but subject to shift coverage.**
3. **Education Services:**

a. How many (and %) of inmate students at this institution are currently enrolled in school? **120 offenders enrolled in education.**

b. How many (and %) of inmate students earn their GED each year in this institution? **Between 115-125 each year. The current pass rate is 82%.**

c. What are some of the problems faced by offenders who enroll in education programs?  
**A lack of motivation since some do not want to be in class. Some are overwhelmed by the amount of orientation information. Since we are in a six month program, students have a small amount of time to reach their educational goals. There is also inadequate space to do small group instruction on the board for those who have visual learning styles.**

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?  
The Maryville Treatment Center program has been developed in collaboration with Gateway Foundation, and certified in conformance with ADA standards for Institutional Treatment Centers, as well as Missouri Department of Corrections policies and procedures. Our model for treating addictive disorders in therapeutic community is based on the foundational concepts of George DeLeon and others in the TC field, and reflected in the *Revised Therapeutic Communities of America Standards for TC's in Correctional Settings*, Office of National Drug Control Policy.

The Maryville Treatment Center is solely dedicated to providing alcohol and drug treatment in a modified therapeutic community (TC) Model, integrated with Missouri Re-Entry Process (transitional) services. Our program provides clients with intermediate and long-term, intensive treatment of substance use disorders in a structured, therapeutic learning environment.

Treatment consists of a four-week orientation to Therapeutic Community, followed by Intensive Addictions Treatment and Re-Entry Skills training. As part of our commitment to the DOC Missouri Re-Entry Process, Maryville Treatment Center also incorporates classes previously given in Transitional Housing Units as well as Medical and Mental Health treatment/classes in our residential treatment program. This includes Pathway-To-Change and the recently-implemented DAI curriculum for Anger Management.

Blended Model of State-Private Services

The Maryville Treatment Center program offers a unique service model in which State Department of Corrections, Division of Offender Rehabilitative Services (DORS) clinical staff are blended with clinical staff from Gateway Foundation, a private provider of treatment services, in a seamless and efficient delivery of programming. This teamwork occurs in a larger context of collaboration with DOC's Division of Adult Institutions (DAI) sections of MTC staff, since the concept of therapeutic community views all facility staff as part of an extended treatment team involved in the client's recovery.

- b. How many beds are allocated to those programs?  
We have approximately 445 offenders here for six-months and 80 for one year. Effective November 21, 2012, one-year beds will gradually be increased by up to 120 offenders court-ordered into Long-Term treatment beds. This will eventually result in a ratio of 200 participants in one-year treatment programming and 325 participants in 6-month treatment programming.
- c. How many offenders do those programs serve each year?  
We serve approximately 1000 offenders per year (445 x 2 plus 80)
- d. What percent of offenders successfully complete those programs?

Completion Summary 01/01/2012 – 11/30/2012		
	TOTAL	%
Total Successful Completers	792	92.7%
Terminated as Unsuccessful*	62	7.3%
Total Clients Serviced to Date in 2012	837	100%

\*Cardinal Rule violations or lack of Therapeutic gain.

During the time period from 01/01/2012 through 11/30/2012, we had 792 successful completions and 62 program terminations due to an inability to benefit from treatment. Fifty-eight offenders were administratively transferred for various reasons of ineligibility, or voluntarily withdrew. These rates are consistent with similar treatment programs.

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?  
The primary challenge is staffing. The location of most prison sites sets them apart from population centers and any type of significant pool of qualified candidates for treatment staff. Often, treatment providers and DORS vie for the same few candidates, and don't hesitate to "hire-away" staff from one agency to another.

Other challenges come from needing to adjust treatment programming to work within institutional procedures.

**5. Vocational Programs: NOT APPLICABLE**

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

**6. Missouri Vocational Enterprises: NOT APPLICABLE**

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes.**
- b. how many offenders are seen in chronic care clinics? **282.**
- c. What are some examples of common medical conditions seen in the medical unit? **Headache, athlete's foot, constipation, cold symptoms jock itch, allergies and gas.**
- d. What are you doing to provide health education to offenders? **Annual health fair, each nursing sick call encounter has a patient education sheet that corresponds with their sick call complaint and chronic care appointments.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? **No.** If so, how did you respond?
- f. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No active cases of TB have been identified in the facility.**
- g. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. **Not at MTC; most aged offenders have a higher M-score than MTC accommodates.**

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services? **Offenders may obtain mental health services primarily in three ways: 1. Submitting an MSR to mental health requesting to be seen; 2. Staff referral; and 3. By declaring a mental health crisis. In the first case, mental health staff will see the offender within five working days of receiving the MSR (the current average is three days). Offenders referred by staff will be seen according to the situation with the time frame varying from within that same working day to five working days. In the event an offender declares a mental health crisis, they will be seen ASAP; usually within two hours, but at least by the end of the day.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **There have been no successful suicides at MTC during the past year. All staff (DOC and contract) receive annual suicide intervention training in order to identify signs and symptoms of persons at risk for suicide. When staff observe an offender who appears to be at risk, they may place the offender on full suicide watch or make an immediate referral to mental health staff for an evaluation, in which case a staff member will stay with the offender until the offender can be seen by mental health. Persons placed on suicide watch are evaluated daily while on watch (MH staff call in and check on them over weekends and holidays), with modification to the watch being made as relevant. When released from suicide watch, they are seen as needed (depending on the nature of the threat, attempt, etc, and their recovery while on suicide watch) to continue to assure they are still no longer at risk.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **As of 11/29/12, MTC averaged 64 offenders taking psychotropic medication, which is approximately 12% of the population.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **As of 11/29/12, MTC had 39 offenders in Mental Health Chronic Care (listed as MH3). Each of these offenders is seen at least every 30 days by mental health staff for observation and evaluation of their ability to function. Each has an individual treatment plan (ITP) developed in cooperation with the offender, mental health therapist, psychiatrist and other staff as pertinent. This ITP is reviewed and revised as needed every 180 days. They are seen by the psychiatrist a minimum of every 90 days, though the normal psychiatric visits are usually about every 60 days. The offenders are also provided individual therapy as needed is identified and agreed upon.**

9. What is your greatest challenge in managing this institution? **One of our greatest challenges is maintaining an effective and efficient operation with less. The pay for Cooks continues to be a problem when it comes to hiring and retaining them.**
10. What is your greatest asset to assist you in managing this institution? **Maryville is fortunate to have staff that take a team approach to problem solving and are dedicated to being the best at what they do. It is always good to have the support of upper management as we do more with less.**
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **The fleet and its conditions are as follows.**

License #	Year	Make/Model	Mileage	Condition
13-0120M	1999	DODGE VAN	86312	Fair
13-0269M	1996	DODGE UTILITY 4WD	44218	Fair
13-0270M	1997	FORD TRUCK OT	45141	Fair
13-0272M	2006	DODGE MINI VAN	128274	Fair
13-0274M	2006	DODGE MINI VAN	130287	Fair
13-0277M	2005	FORD VAN 15 PASSENGER	219560	Fair
13-0281M	1996	JEEP UTILITY 4WD	94908	Poor
13-0282M	1996	DODGE UTILITY 4WD	47162	Fair
13-0286M	1992	CHEVY UTILITY 4WD	80570	Fair
13-0287M	1998	FORD TRUCK OT	14134	Fair
13-0339M	2007	FORD SEDAN	76017	Good
13-0393M	1987	C-50 TRUCK	40706	Fair
13-0395M	1999	DODGE VAN 15-PASSENGER	112746	Very Poor
13-0509M	2002	FORD SEDAN	142274	Fair
13-0703M	2005	FORD VAN 15-PASSENGER	216094	Fair
13-0781M	2003	FORD SEDAN	111383	Fair
32-0227M	2008	CHEVY SEDAN	79937	Good
32-0263M	2008	CHEVY MIN VAN	97266	Good
13-0331M	2012	FORD VAN 15-PASSENGER	19810	Good

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer) The morale of Custody staff at Maryville Treatment Center is assessed overall as medium. The custody section has received new post orders and is getting used to several new standard operating procedures. Many custody staff members are experiencing a certain amount of uneasiness in adjusting to the new expectations. However, a significant decrease in the amount of formal staff complaints has been noted. This reporting Chief of Custody has also noted a drop off in the number of informal resolution requests and grievances filed against supervisors and other staff members. As always, low pay and health care continue to be points of concern for custody staff.**
13. Caseworkers:
- a. How many caseworkers are assigned to this institution? **5**
  - b. Do you currently have any caseworker vacancies? **No**
  - c. Do the caseworkers accumulate comp-time? **Minimal**
  - d. Do the caseworkers at this institution work alternative schedules? **Only as needed**
  - e. How do inmates gain access to meet with caseworkers? **Treatment offenders submit a line of communication form to classification staff who then respond appropriately.**
  - f. Average caseload size per caseworker? **105 offenders is the average caseload.**
    - # of disciplinary hearings per month? **112 average**
    - # of IRR's and grievances per month? **21 IRRs and 5 grievances**
    - # of transfers written per month? **13 average**
    - # of re-classification analysis (RCA's) per month? **102 RCAs average**
  - g. Are there any services that you believe caseworkers should be providing, but are not providing? **Our caseworkers do a very good job of responding to the variety of issues the offenders have. We are melding treatment services and reentry services so the offenders receive both. I do not see any other services we should offer.**
  - h. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**



- i. What type of inmate programs/classes are the caseworkers at this institution involved in? **Caseworkers assist in providing substance abuse treatment services, participate in the Offender Management Team and Program Review Committee processes. Caseworkers facilitate Pathways to Change, Impact of Crime on Victim Classes and Anger Management and various aspects of the Missouri Reentry Process.**
- j. What other duties are assigned to caseworkers at this institution? **Caseworkers also assist in training other staff and sit on various committees. Other additional duties include Visiting Liaison, Assistant Visiting Liaison, Required Activities/Work Release Assistant Activities Coordinator, Grievance Officer and Assistant Grievance Officer, Puppies for Parole Coordinator and Assistant P4P Coordinator, Restorative Justice Coordinator and Assistant RJ Coordinator. Caseworkers complete the Transition accountability Plans with offenders, along with the regular duties in classification (ie, all disciplinary, classifying offenders, visitation, offender questions and issues, etc).**

14. **Institutional Probation and Parole officers:**

- a. How many parole officers are assigned to this institution? **4**
- b. Do you currently have any staff shortages? **No**
- c. Do the parole officers accumulate comp-time? **Minimal**
- d. Do the parole officers at this institution flex their time, work alternative schedules? **As needed**
- e. How do inmates gain access to meet with parole officers? **Schedule Appointment/utilize Line of Communication**
- f. Average caseload size per parole officer? **Population divided by 4 officers currently**
  - # of pre-parole hearing reports per month? **0 during CY11**
  - # of community placement reports per month? **94**
  - # of investigation requests per month? **94**
- g. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- h. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- i. What type of inmate programs/classes are the parole officers at this institution involved in? **None presently.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **The number one issue on our list is the same; replacement windows in Bldgs. 2 & 3. My first concern is the safety with the windows in Bldg 3 being single pane. This also affects the efficiency when heating the building. This type of window in both buildings makes it very difficult to control the heating and cooling which can be very costly.**

16. Does your institution have saturation housing? If so, how many beds? **No, the Maryville Treatment Center does not have saturation beds; however, we have been informed to keep 36 beds in stock to allow for the possibility of saturation beds.**

17. **Radio/Battery Needs:**

- a. What is the number of radios in working condition? **120**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **MTC has received and installed the new radio system upgrade over the course of the summer and fall. At this time, MTC has 120 radios and sufficient batteries and chargers to meet our current needs. The new radios have a greater range and much improved penetration capabilities. This had made significant improvements in all aspects of radio communications. Also, the new batteries hold a charge for a significantly longer period of time which nearly eliminated the need for staff to exchange batteries during their assigned shift. Due to the benefits of the new batteries, MTC currently has sufficient batteries in reserve to meet the current operational needs.**

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name: Missouri Eastern Correctional Center			
Custody Level	3	Warden	Jennifer Sachse
Total Acreage	250	Address	18701 Old Highway 66
Acreage w/in Perimeter	40		Pacific, MO 63069
Square Footage	247884	Telephone:	636.257.3322
Year Opened	1981	Fax:	636.257.5296
Operational Capacity/Count (as of November 30, 2012)	1100/1083		
General Population Beds (capacity and count as of November 30, 2012)	1024/986	Deputy Warden	Michael Layden
Segregation Beds (capacity and count as of November 30, 2012)	100/92	Deputy Warden	Brenda Short
Treatment Beds (capacity and count as of November 30, 2012)	0	Asst. Warden	George Hayes
Work Cadre Beds (capacity and count as of November 30, 2012)	0	Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	0	Major	Alan Ham
Protective Custody Beds (capacity and count as of November 30, 2012)	0		

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?
  - Fair
- b. What capital improvement projects do you foresee at this facility over the next six years?
  - Due to continuing budget cuts, we are unable to project if there will be any capital improvements in the next six years.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
  - The capital improvements needed are the replacement of the roofs on each of our buildings, replacement of the food service floor, and the replacement of our perimeter road and parking lot. The completion of these projects is crucial, as failing to do so will create damage elsewhere. For example, water leaking from the roof has created damage inside the buildings, and deterioration of our perimeter road causes vehicle damage.

## 2. **Staffing:**

- a. Do you have any critical staff shortages?
  - No.
- b. What is your average vacancy rate for all staff and for custody staff only?
  - All staff = 3 per month, Custody staff = 4 per month.
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
  - Due to limited funding for comp time payouts, we must closely monitor and manage all comp time that is earned. It is a very tedious and time-consuming task for supervisors.
- d. What is the process for assigning overtime to staff?
  - First we request volunteers, then, if necessary, we select a name from the overtime list.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?
  - Approximately 75% is used, 25% paid out.
- f. Is staff able to utilize accrued comp-time when they choose?
  - Yes, at times.

## 3. **Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
  - 330/33%
- b. How many (and %) of inmate students earn their GED each year in this institution?
  - 120/30%
- c. What are some of the problems faced by offenders who enroll in education programs?
  - A high per cent of our offender students approximately 80% have learning disabilities which was a major problem that resulted in them dropping out of public schools.

## 4. **Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?
  - Living in Balance is a 60 hour, 24 session *educational* program that focuses on the effects drug involvement has behaviorally and cognitively on lives and the changes needed to become competent productive citizens in society upon release.
- b. How many beds are allocated to those programs?
  - 0
- c. How many offenders do those programs serve each year?
  - 285
- d. What percent of offenders successfully complete those programs?
  - 79.8%
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting?
  - Offenders being allowed to drop out without consequences. Offenders being allowed to drop out without consequences. Not offering an evening program for the offenders on outside clearance or involved in other day time classes. Offenders needing to leave class to go to property issue, case manager meetings, canteen pick-up or dog training. Offenders have a difficult time accessing me in times of crisis or when they need counseling services. Office is a part of the classroom so when doing one-on-one counseling it interrupts class or class disrupts discussion/lack of confidentiality. General staff lack understanding of addiction and the issues that surround it.

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?
  - Presently we offer "Professional Landscaping and Gardening". In the near future we will offer "Web Design".
- b. How many offenders (and %) participate in these programs each year?
  - Approximately 50-60 per year, this is a 10 week course, probably having 5 sessions per year.
- c. Do the programs lead to the award of a certificate?
  - Yes, a Department of Labor certificate will be earned by the graduates.
- d. Do you offer any training related to computer skills?
  - Not yet, but in the future we will offer "Web Design".

**6. Missouri Vocational Enterprises:**

MECC does not currently manufacture any products

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?
  - Yes.
- b. How many offenders are seen in chronic care clinics?
  - This varies as offenders are constantly being transferred in/out and released. The average is around 800 in clinics however some offenders are in multiple clinics.
- c. What are some examples of common medical conditions seen in the medical unit?
  - Seasonal sickness (colds, hay fever/allergies), athletes foot, rash/dermatitis type, other skin issues such as MRSA, non-MRSA staph, urinary problems-mostly related to aging (BPH, some cases of prostate cancer), chronic pain, etc.
- d. What are you doing to provide health education to offenders?
  - Annual health fair, r/o process, during sick call visits and chronic care visits, etc.
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
  - No.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain
  - Yes, in general the population is "sicker" and requiring more care than before, more medications needed for various things such as cholesterol, HTN, chronic pain, more cases of hepatitis C are being discovered, diabetes is on the rise, obesity is a major problem everywhere which causes many other health issues as those listed above.

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?
  - The majority of offenders arrive at MECC already being enrolled at a MH3 and are simply enrolled in our chronic care clinic here. Those offenders that desire services through MH can forward an MSR to be seen. Also, anyone working within the prison can forward a referral if they see an offender who appears to be having some problems and we will get them in the office and make an assessment of their needs.
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?
  - We had no suicides at MECC so far this year (2012). In MH we are always cognizant of offenders that may be having some stressful times and we also rely on custody and all staff to observe folks that may be having some problems and report them to us.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?
  - Approximately 251 offenders (23% of 1091) are on psychotropic medications prescribed by the psychiatrist(s).
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?
  - If we assume that those 251 offenders that are taking medications are severely, chronically mentally ill then this is 23% of our population here at MECC. We meet at least monthly with each offender taking medication(s) and/or per MSR as needed. The MH-RN also sees many of the offenders each month for nursing and our psychiatrists see each offender at least every 90 days but many offenders are seen more often.

**9. What is your greatest challenge in managing this institution?**

The greatest challenges are the turnover of line staff to higher paying jobs, and maintaining and ensuring repairs of a 30 year old facility.

**10. What is your greatest asset to assist you in managing this institution?**

Tenured, dedicated staff.

**11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)**

Poor. We have numerous vehicles with over 130,000 miles, resulting in costly repairs. These are not cost-effective on vehicles with excessive mileage.

**12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.**

**(Please have the Major answer)**

Morale is medium to high. We get few complaints and few grievances.

**13. Caseworkers:**

- A. How many caseworkers are assigned to this institution?
  - 16
- B. Do you currently have any caseworker vacancies?
  - Yes.
- C. Do the caseworkers accumulate comp-time?
  - No.
- D. Do the caseworkers at this institution work alternative schedules?
  - Yes

- E. How do inmates gain access to meet with caseworkers?
  - Scheduled office hours, Housing Unit tours and through letters, Wing Representative. Meetings.
- F. Average caseload size per caseworker?
 

94

  - # of disciplinary hearings per month?
    - 90
  - # of IRR's and grievances per month?
    - 10
  - # of transfers written per month?
    - 15-25
  - # of re-classification analysis (RCA's) per month?
    - 31
- G. Are there any services that you believe caseworkers should be providing, but are not providing?
  - No.
- H. If so, what are the barriers that prevent caseworkers from delivering these services?
  - n/a
- I. What type of inmate programs/classes are the caseworkers at this institution involved in?
  - Inside Out Dad, Anger Management, Pathway To Change, Impact of Crime on Victims, Beat The Street, 4H for life, Alternative to Violence, Puppies for Parole.
- J. What other duties are assigned to caseworkers at this institution?
  - Birth certificates, social security applications, facilitate in-service training, Medicaid, state identification cards, Free Application for Federal Student Aid, vocational training application, case management meetings, mentor, assist with home plans, assist legal issues, access to employment information, evidence-based inquiries, Missouri Department of Transportation assessment and payroll, outside clearance applications, visiting applications, Missouri Uniform Law Enforcement System, job assignments, Adult Internal Classification System data entry, Transitional Assistance Program, administrative segregation hearings, grievances, restorative justice, green checks/account issues, assist with property for administrative segregation placement and Acting Functional Unit Manager capacity, investigations, housing unit inspections, institutional inspections, institutional tours, interview boards, etc.

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution?
  - 6
- B. Do you currently have any staff shortages?
  - no
- C. Do the parole officers accumulate comp-time?
  - yes
- D. Do the parole officers at this institution flex their time, work alternative schedules?
  - yes
- E. How do inmates gain access to meet with parole officers?
  - Open office hours or notes
- F. Average caseload size per parole officer?
  - 180
  - # of pre-parole hearing reports per month?
    - 25
  - # of community placement reports per month?
    - 5

- # of investigation requests per month?
  - 40

G. Are there any services that you believe parole officers should be providing, but are not providing?

- Parole intake class

H. If so, what are the barriers that prevent officers from delivering these services?

- time

I. What type of inmate programs/classes are the parole officers at this institution involved in?

- Offenders Offering Alternatives and a Pre-Release Class

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. n/a

16. Does your institution have saturation housing?

MECC does not have saturation housing.

**17. Radio/Battery Needs:**

- What is the number of radios in working condition?
  - 288
- Do you have an adequate supply of batteries with a good life expectancy?
  - Yes.
- Are the conditioners/rechargers in good working order?
  - Yes.

# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: Moberly Correctional Center			
Custody Level	C3	Warden	Dean Minor
Total Acreage	320	Address	5201 S. Morley Street
Acreage w/in Perimeter	80		Moberly, MO 65270
Square Footage	520,576	Telephone:	660-263-3778
Year Opened	1963	Fax:	660-263-8206
Operational Capacity/Count (as of November 30, 2012)	1,800		
General Population Beds (capacity and count as of November 30, 2012)	1,480	Deputy Warden	Teresa Thornburg
Segregation Beds (capacity and count as of November 30, 2012)	178	Deputy Warden	Lisa Pogue
Treatment Beds (capacity and count as of November 30, 2012)	0	Asst. Warden	Sherry Dunseith
Work Cadre Beds (capacity and count as of November 30, 2012)	1628 capacity	Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	158 capacity	Major	Steve Simmons
Protective Custody Beds (capacity and count as of November 30, 2012)	66		

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?

Good

- b. What capital improvement projects do you foresee at this facility over the next six years?

- Upgrade/Replace vehicle sally port and truck gate entry controls
- Repair/Replace kitchen floor in food service
- Replace non-efficient security windows in 1000+ cells
- Replace non-efficient windows (approximately ½ security windows) in administration building
- Replace aged high temperature water lines in throughout the institution

- c. How critical do you believe those projects are to the long-term sustainability of this facility?



The sally port and truck gate system is a security concern and is critical to the security of the institution. The kitchen floor is critical as it is a safety and sanitation concern. The other items are important in that staying on top of these issues is critical to the long term maintenance and efficiency of the institution.

**2. Staffing:**

- a. Do you have any critical staff shortages?

No Critical Shortages

- b. What is your average vacancy rate for all staff and for custody staff only?

For 2012 the average vacancy rate for all staff was 1%.

- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Yes, a consistent effort is made to eliminate the accumulation of comp time.

- d. What is the process for assigning overtime to staff?

We utilize a voluntary overtime list. We try to achieve consistency when assigning overtime; however, some posts require more overtime (i.e. Transportation Officers). This is due to court out counts, medical appointments, and emergency medical out counts. It is difficult to impossible to accurately predict staffing needs in all situations. When it is necessary to mandate overtime, we utilize a seniority based system.

- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

In FY12, 56% of comp time was paid off and 44% was utilized as time off.

- f. Is staff able to utilize accrued comp-time when they choose?

We consistently make an effort to flex comp time to reduce accrual and aid in managing our work force. Efforts are made to work with employees to grant the usage of comp. time at a mutually convenient time for supervisors and employees.

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?

- 480 or 27%

- b. How many (and %) of inmate students earn their GED each year in this institution?

- Approximately 68 this year, or approximately 15%

- c. What are some of the problems faced by offenders who enroll in education programs?

The problems faced by offenders who enroll in education programs here at MCC are basically the same as previously reported.

- Attitude – Many offenders have failed in school while on the streets and need to find success in order to advance and work up to their ability.
- Many offenders have been labeled as “learning disabled” and believe they cannot learn.
- Poor communication skills.

**4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?

MCC has 10 Substance Abuse programs:

- Relationships
- Lifestyles & Values
- Relapse, Recovery and Recidivism
- Commitment to Change
- Commitment to Change II
- Commitment to Change III
- Substance Abuse Basic Educations (Living in Balance)
- Basic Relapse Prevention
- Living in Balance (This is the Substance Abuse Basic Education Class.)
- Good Intentions, Bad Choices

- b. How many beds are allocated to those programs?

Not applicable, participation is not linked to beds. All offenders are eligible to participate in offered programming. Priority is granted to those closest to release.

- c. How many offenders do those programs serve each year?

600-800

- d. What percent of offenders successfully complete those programs?

Approximately 60%; this stays about the same due to transfers, parole releases, assignments to disciplinary segregation, and refusals.

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

- Denial of a problem
- Lack of responsibility
- Attitude towards making positive change
- A belief they would prefer to complete programs after release
- Offenders not willing to admit a need for help

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?

Currently MCC offers a welding course which allows for apprenticeship with the Department of Labor and a letter of completion from the Department of Corrections, as well as hands-on-training with welding equipment. The course is also accredited through the National Center for Construction Education and Research (NCCER) with the students receiving a certification through NCCER. This accreditation is awarded by module, so if a student is unable to complete the program they still receive credit for modules completed on NCCER's national database which potential employers can access.

- b. How many offenders (and %) participate in these programs each year?

Approximately 30 offenders participate in these programs per year.

- c. Do the programs lead to the award of a certificate?

All offenders completing the class receive a DOC completion certificate, a Department of Labor Apprenticeship certificate, and a certificate from National Center for Construction Education and Research, which includes an ID card and registration number so employers can verify training.

- d. Do you offer any training related to computer skills?

All CTE classes utilize technology in some manner, as well as some usage of the computer. For the welding program computer skills utilized would be based upon reinforcement of lesson information and basic business skills. This includes email etiquette, how computers operate, and basic knowledge of hardware and software. Training is also provided on how computers have changed the construction and welding industries.

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?

- Vehicle Decals
- Picnic Tables
- Shelving Units
- BBQ Grills
- Rolling File Cabinets
- Beds
- Footlockers
- Tables for the Institution
- File Cabinets
- Specialty License Plates
- Highway Signs
- 4-Color Printing of State Forms, Envelopes, and Publications
- Laundry Services for the Institution along with the University of Missouri Hospitals, Residence Halls, and Jefferson City Hospital.
- Specialty items are made upon request

- b. How many (and %) of offenders work for MVE at this site?

MVE employs 354 or 20% of offender workers at MCC.

- c. Who are the customers for those products?

Any tax-supported entity (state, city, county, and federal) Not-for-Profit organizations and state employees.

- d. What skills are the offenders gaining to help them when released back to the community?

Offenders working for MVE at MCC learn skills that are transferrable to manufacturing and many other types of businesses. Many of the offenders at MCC are registered with the U. S. Department of Labor Apprentice Program in a variety of skilled areas including, but not limited to:

- Bindery Machine Operator
- Coating, Painting, and Spraying Machine Setter
- Combination Machine Tool Setter and Operator
- Computer Operator
- Industrial Machinery Mechanic
- Laundry Machine Operator
- Material Inspector
- Mechanical Drafter
- Press and Press Brake Machine Setter
- Printing Press Machine Operator
- Production Laborer
- Production, Planning, and Expediting Clerk
- Welder
- Work Ethics and Job Responsibility
- Necessary Skills to Survive After Release

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?

Yes

- b. How many offenders are seen in chronic care clinics?

The chronic care clinics number of offenders is as shown below and some of the patients are enrolled in more than one clinic:

- Cardiovascular: 392
- Pulmonary: 131
- Infectious Disease: 8
- Diabetes: 72
- Internal Medicine: 68
- Seizures: 133
- Infectious Disease Non-TB: 30
- Pulmonary Non-Asthma: 57
- Endocrine Non-Diabetes: 14
- Cancer: 23
- Hepatitis C: 320
- Glaucoma: 15

- Chronic Hepatitis B: 8

c. What are some examples of common medical conditions seen in the medical unit?

- Diabetes
- Hypertension
- Seizures
- Hepatitis
- Cardiovascular Disease
- Asthma
- Other Conditions
- Nursing sees patients through sick call for such complaints as colds, back pain, athlete's foot, hemorrhoids, insect bites, sprains, and other injuries and illnesses.

d. What are you doing to provide health education to offenders?

We provide pamphlets and instruction sheets to offenders in the chronic care clinics and during sick call. Physicians and nurses also provide health education verbally to offenders. Numerous posters and notices are posted for offenders regarding general health risks such as flu and accidents. An annual health fair is conducted as well.

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

No

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.

Yes, we are faced with more chronically ill patients as the prison population ages. With this, we are faced with concerns regarding their ability to ambulate stairs and distances effectively, their ability to maintain their cognitive processes regarding use of medications and appointments, and their general knowledge of their disease process and treatment options. We find that older populations require more follow-ups, more treatments, more medications, and more staff interaction.

## 8. **Mental Health Services:**

a. How do offenders go about obtaining mental health treatment services?

All mental health 3 offenders or higher (moderate to maximum need) are automatically scheduled to see a Qualified Mental Health Professional at least once per month. Mental Health 4 offenders meet with a psychiatrist once per month as well as the Qualified Mental Health Professional. Any offender can receive mental health services by request through completing a Medical Services Request form and checking the mental health box. All offenders at MCC, regardless of mental health score, can self refer for individual and/or group counseling. Offenders may also participate in the following programs:

- Adjustment to Incarceration (Coping with Incarceration)
- Aftercare Transition Group (Life After Release)
- Anxiety Management

- Charting a New Course (Planning For a Better Life)
  - Cognitive Behavioral Therapy Group
  - Chronic Suicidal Thoughts/Suicidal Behaviors (Coping and Hoping)
  - Dealing With Feelings
  - Depression Group
  - Grief Support (Grief and Loss)
  - Healthy Relationships
  - Psychotropic Medication Management Group
  - Responsible Parenting
  - Sleep Hygiene Group
  - Taking a Chance on Change
  - Thinking Errors
  - Trauma Group
  - Understanding Mental Health With Symptom Management (Accepting Mental Illness)
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

We had four serious suicide attempts in 2012 with one fatal incident or 25% at MCC. Offenders who are high risk of committing suicide are “red flagged” at the time of intake by receiving a “Suicide Risk” score of two or higher. All MCC staff has been trained in suicide prevention. In addition, the MARS screen has been modified to allow staff to see the suicide risk score. High risk offenders are not allowed to have any medications in their cells. All offenders with a past history of suicide attempts are staffed monthly in the Clinical Executive Committee meeting.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

Moberly Correctional Center has an average of 78 or 23% of the total population on psychotropic medications.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

MCC is the only custody level three or lower facility that can house up to MH-4 offenders. On average, we house approximately 24 offenders who currently carry a mental health score of MH-4 and approximately 399 with a MH-3 score. All offenders who carry a MH-4 rating are seen monthly by their Qualified Mental Health Professional and their treatment psychiatrist. MH-3 offenders are seen once per month. Psychiatric staff monitors these offenders closely. A psychiatric nurse is also available to provide interventions as needed.

9. What is your greatest challenge in managing this institution?

MCC was built in 1963. Operating and maintaining an institution designed and built almost fifty years ago is a challenge. Maintaining positive morale of employees in a difficult economy, while benefits are reduced and wages fall behind becomes increasingly difficult. Funding for needed capital improvements is not available under present budget conditions. These issues are compounded each year they are put off.

10. What is your greatest asset to assist you in managing this institution?

Our greatest asset at MCC is our capable, experienced, and willing staff.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Our fleet is in fair condition. Our vehicles range in years from 1998 to 2008. The fleet ranges from 54,000 miles to 190,000 miles. Most are in sound running condition, but we increasingly have to pull vehicles off line for repairs and we had to unexpectedly replace one vehicle this year.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Generally, MCC staff has a great attitude toward the institution, their careers, and the mission of the department. The staff at MCC maintains a high level of professionalism and strives to do the best they can. However, several employees routinely discuss the higher cost of living, and rising insurance costs. The need for many staff to work two jobs to maintain their families and homes is a continuous struggle for most.

13. **Caseworkers:**

A. How many caseworkers are assigned to this institution?

23

B. Do you currently have any caseworker vacancies?

No

C. Do the caseworkers accumulate comp-time?

No, they flex out their time and do not normally accrue comp time.

D. Do the caseworkers at this institution work alternative schedules?

Yes. Classification staff work either 8:00 a.m. to 4:30 p.m.; or, 10-hour days, 7:00 a.m. to 5:30 p.m.

E. How do inmates gain access to meet with caseworkers?

The case managers have offices in the housing units with an open door policy or by written request.

F. Average caseload size per caseworker?

90

- # of disciplinary hearings per month?

312

- # of IRR's and grievances per month?

IRR-82 & Grievances-28

- # of transfers written per month?

56

- # of re-classification analysis (RCA's) per month?

297

G. Are there any services that you believe caseworkers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent caseworkers from delivering these services?

N/A

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

- Impact of Crime on Victims
- Anger Management
- Pathway to Change
- Inside Out Dads
- Puppies for Parole
- Restorative Justice

J. What other duties are assigned to caseworkers at this institution?

- Grievances are handled by one case manager.
- One Case Manager is a specialist with MRP services.
- Functional Unit Managers, Case Managers, and Corrections Classification Assistants are used throughout the year to assist the training officer when needed.
- On occasion, Correction Classification Assistants are also used to cover custody posts and fill in for absences in other areas.

**14. Institutional Probation and Parole officers:**

A. How many parole officers are assigned to this institution?

9

B. Do you currently have any staff shortages?

1- IPO



C. Do the parole officers accumulate comp-time?

No

D. Do the parole officers at this institution flex their time, work alternative schedules?

Yes

E. How do inmates gain access to meet with parole officers?

A parole officer is available in the MRP office and chapel office within the institution. All other officers can be contacted through written request or by dictated communication.

F. Average caseload size per parole officer?

250

- # of pre-parole hearing reports per month?

130-140

- # of community placement reports per month?

7-8

- # of investigation requests per month?

80-90

G. Are there any services that you believe parole officers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent officers from delivering these services?

N/A

I. What type of inmate programs/classes are the parole officers at this institution involved in?

Current staff are not trained to facilitate programs. In the past, parole staff has facilitated ICVC and Anger Management programs.

14. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

The fact our department consistently lags far behind other state's department of corrections and other industries in salary is a concern regarding the recruiting and retention of quality, professional

employees. We appreciate the support we consistently receive from the Joint Committee on Corrections and realize you face difficult challenges.

15. Does your institution have saturation housing? If so, how many beds?

MCC has no saturation housing.

**17. Radio/Battery Needs:**

a. What is the number of radios in working condition?

380

b. Do you have an adequate supply of batteries with a good life expectancy?

We currently have an adequate supply of radio batteries in stock and the chargers are in good condition.

c. Are the conditioners/rechargers in good working order?

Our radio system was replaced this year. Therefore, we foresee no need for replacement in the near future.

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits December 2012**

Facility Name: <b>Northeast Correctional Center</b>				
Custody Level	C-4		Warden	James A. Hurley
Total Acreage	112 Acres		Address	13698 Airport Rd.
Acreage w/in Perimeter	42 Acres			Bowling Green, MO 63334
Square Footage	1,829,520		Telephone:	(573) 324-9975
Year Opened	1998		Fax:	(573) 324-5339
Operational Capacity/Count (as of January 15, 2012)	2106/2099			
General Population Beds (capacity and count as of January 15, 2012)	1914/1841		Deputy Warden	Chantay Godert (Offender Management)
Segregation Beds (capacity and count as of January 15, 2012)	192/188		Deputy Warden	Vacant (Operations)
Treatment Beds (capacity and count as of January 15, 2012)	24/62		Asst. Warden	Richard "Scott" Griggs
Work Cadre Beds (capacity and count as of January 15, 2012)	0/8		Asst. Warden	
Diagnostic Beds (capacity and count as of January 15, 2012)	N/A		Major	Tim Truelove
Protective Custody Beds (capacity and count as of January 15, 2012)	N/A			

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution? *GOOD*
- b. What capital improvement projects do you foresee at this facility over the next six years?
  - 1) *Replacement of security system control computer and numerous control panels: Currently, the computer in use is in need of repair and often malfunctions causing doors to open without warning and/or causing areas in the institution to go into duress. These malfunctions range from the inability to secure doors, open doors, or allow doors to suddenly open which places staff and offenders in compromised situations. Also affected is the facility's intercom system. The estimated cost to replace the computer and software is \$70,000. No funding is available through the institutional budget for repairs. Based on the current agreement with FMDC, the replacement falls under their umbrella of responsibility.*
  - 2) *Del-Norte: Our security fence is obsolete and is difficult to find replacement parts to repair it. The Del-Norte is our first line of perimeter security.*
  - 3) *Heating loop replacement: Our current underground system has been a nightmare, deteriorating and often requiring costly repairs leading to increased heating costs.*

4) *Parking lot and perimeter road resurfacing: Currently the parking lot and perimeter road is in severe disrepair. Patching has been ongoing; however, due to a failing base under the asphalt, it needs a complete replacement. The present condition of these areas has led to numerous repair issues with perimeter patrol vehicles.*

- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
*The above issues are listed in order of priority regarding sustainability.*

## **2. Staffing:**

- a. Do you have any critical staff shortages?  
*We do not have many vacancies at the present however; critical staffing issues still continue to be an issue due to extended FMLA covered leave, and Military leave. The current allotment of custody staff does not make up for the average vacancy rate and these absences.*
- b. What is your average vacancy rate for all staff and for custody staff only?  
*1.67 for non-custody and 6 to 8 for custody.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
*Yes it is difficult to manage due to vacancies and extended leave.*
- d. What is the process for assigning overtime to staff?  
*NECC utilizes a rotation list for custody officers, dropping those who work overtime to the bottom of the list again. There is rarely a need for overtime on the part of noncustody.*
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?  
*About 80% of accrued comp time is scheduled off, with the remainder being compensated.*
- f. Is staff able to utilize accrued comp-time when they choose?  
*Yes if staffing levels on shifts allow. Very rarely is an employee denied time off when they are utilizing comp time.*

## **3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?  
*Currently there are 147 offenders enrolled in school. This is 38% of the eligible offenders, those with E-Scores ranging from 2-5. These numbers are low due staff cuts from budget reductions in June of 2012.*
- b. How many (and %) of inmate students earn their GED each year in this institution?  
*1070 offenders have earned their GED since 9/9/98, which is an average of 76 offenders attaining their GED each year. 78% of those offenders taking the test receive a passing grade.*
- c. What are some of the problems faced by offenders who enroll in education programs?  
*When offenders enter the educational program, they face three basic problems. First, they see no need for having an education. They were making a living without an education prior to incarceration, so why attain one now? Secondly, they enter the educational program with learned failure. They have a limited concept of success. Thirdly, they lack the self-discipline to plan for the future. Therefore, they have difficulty goals for themselves. It is difficult to attain a GED when short-sightedness dominates your lifestyle.*

## **4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?  
*We have Pathways to Change, Inside-Out Dads, Living in Balance, Men's Work, and several education classes that provide knowledge on mental health, drugs, recovery, relapse prevention, re-entry, DWI/DUI, parenting and employment.*
- b. How many beds are allocated to those programs?  
*62 beds*

- c. How many offenders do those programs serve each year?  
*In 2011, NECC had 70 offenders enrolled in the program. However, the program was significantly expanded this summer (a new contract went into effect July 1<sup>st</sup>) and we increased participation from 24 offenders at a time to 62, so the number of graduates will be growing. So far this year we have had 111 offenders enrolled in the program—58 of these are currently enrolled. Forty offender have successfully completed the program in 2012, and 13 have not successfully completed the program.*
- d. What percent of offenders successfully complete those programs?  
*92.3% successfully completed the program in 2011*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?  
*Difficulties include keeping everyone on the same page for the treatment and maintaining separation with the treatment offenders from those in General Population.*

## 5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?  
*The Microcomputer Repair Program was originally established at Northeast Correctional Center in November 1998 with the first Microcomputer Repair and Refurbishing class. This program was developed to have educational courses and a “Computers for Schools” program to offer both knowledge and experience to the students in this correctional facility.*  
*Students begin course work in this program with the Microcomputer Repair and Refurbishing class which is offered several times each year. They begin with five weeks of classroom instruction. This instruction provides students with the necessary tools to prepare them to enter the competitive field of PC repair. Topics discussed include personal computer hardware architecture and related operating systems. Students will learn individual system components, command line syntax, I/O Operations, Number Systems, Bus Architecture, IRQ-DMA, Multimedia Components and System Troubleshooting – Diagnostics. This course continues with five weeks of laboratory experience. It is the goal of this portion of the class to be able to verify the theory taught in the first part of the class by working on actual systems. Any student taking this class should be able, by its completion, to take all of the various pieces of a modern computer and assemble it into a complete, fully functional system. The student will complete a Pentium 4 system with DVD, surround sound, network card, updated video, and running Windows 7. He should have a full understanding of how to manage, upgrade, and repair this system as well as add it to a home network.*  
*Additional classes are available to the students in Northeast Correctional Center by the St. Charles Community College Career and Technical Department. These classes have been offered to students requesting them to expand the skills from the Microcomputer Repair class. These classes have been offered occasionally as they had been requested, but only some of them can be continued to be offered under current contract as amended reducing instructional staff.*  
*The Microcomputer A+ Certification Preparatory class is offered to students about twice each year. It is the goal of the A+ class to become familiar with the industry standard A+ exam and to gain an understanding of areas of improvement needed to pass the test. This class contains ten (10) weeks of instruction and experience in the Computer Lab. Instruction topics are based on “Mike Meyers A+ Repair” 7<sup>th</sup> Edition and test are based on the Mike Meyers 2009 A+ Standard.*  
*The Microcomputer Programming class was offered about once each year. This course was intended to introduce the concepts of programming lasting ten (10) weeks. These concepts included Structured Design, Problem Solving Strategies, Best Practices of Documentation and Naming, and Object-Oriented Design, among others. The class was organized as a combination of Lecture and Lab. Lecture days were alternated with Lab Days throughout the course. Programming was done with a blend of pseudocode and the Python Programming Language. Instruction topics were based*

on “A Guide to Programming with Python.” This class will not be available under current staffing conditions.

The Microcomputer Applications class is offered about once each year. This ten (10) week course provides students with practical, hands-on training in the current Microsoft Office. The course covers the following Applications: Word, Excel, PowerPoint, Outlook and Access. Projects are assigned to the students throughout the course. These projects use the various applications and are geared towards practical, real-life activities. Instruction topics are based on current Microsoft Office guide manuals.

Topic specific courses have been offered to a few students that have successfully completed multiple classes on a trial basis. We had some students working on an Advanced Programming course. In this class, students developed a project proposal with goals to effectively measure its progress. Weekly, the instructor advised the student on additional resources in addition to examining progress. Upon completion, the student showcases the project to this instructor and class. Additional classes of this nature can not be offered under reduced staff situation.

- b. How many offenders (and %) participate in these programs each year?

The following chart shows our enrollment in classes. The following are the actual class names from the abbreviations used in the chart.

*MCR – Microcomputer Repair and Refurbishing Class*

*A+ - A+ Certification Test Preparation Class*

*Prog – Microcomputer Programming Class*

*Appl – Microcomputer Applications Class*

*Adv Prog – Advanced Computer Programming Class*

*Total – This is the total enrollment of all the classes of the year.*

*Note: Since I do not have a record of the population counts of the time periods, I am unable to provide percentages for this question.*

### NECC/SCC Course Enrollment

Period	MCR	A+	Prog	Appl	Adv Prog	Total
July 1, 1999 thru June 30, 2000	113	0	0	0	0	113
July 1, 2000 thru June 30, 2001	68	17	18	0	0	102
July 1, 2001 thru June 30, 2002	82	17	16	0	0	115
July 1, 2002 thru June 30, 2003	113	17	16	0	0	146
July 1, 2003 thru June 30, 2004	114	16	17	0	0	147
July 1, 2004 thru June 30, 2005	100	17	0	16	0	133
July 1, 2005 thru June 30, 2006	66	35	17	16	0	134
July 1, 2006 thru June 30, 2007	99	17	0	17	0	133
July 1, 2007 thru June 30, 2008	81	16	0	17	0	114
July 1, 2008 thru June 30, 2009	105	18	0	17	0	140
July 1, 2009 thru June 30, 2010	85	118	33	0	0	136
July 1, 2010 thru June 30, 2011	71	33	0	17	6	127
July 1, 2011 thru June 30, 2012	99	19	17	0	0	135
July 1, 2012 thru June 30, 2013	36	0	0	19	0	55

- c. Do the programs lead to the award of a certificate?
- *Students that successfully complete our classes receive the following: Microcomputer Repair and Refurbishing class students receive a certificate from St. Charles Community College, three (3) college credits from St. Charles Community College, and a certificate for a completed U.S. Department of Labor Apprenticeship.*
  - *A+ Certification Test Preparation class students can receive a letter for completing the course from St. Charles Community College and may schedule to take the A+ Repair Certification Test upon their release.*
  - *Microcomputer Programming class students received a letter from St. Charles Community College for completion with basic computer programming skills.*
  - *Microcomputer Applications class students receive a St. Charles Community College letter for completion with knowledge and skills for using Microsoft Office applications.*
  - *Advanced Computer Programming class students received a St. Charles Community College letter for completion with knowledge and skills in computer programming*
- d. Do you offer any training related to computer skills?
- All St. Charles Community College Career and Technical Courses provide skills in various areas of computer skills.*

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?
- MVE Office Systems Factory (OSF) produces office systems that include fabric covered panels, laminated work surfaces, and laminated file cabinets.*

*The panels produced by OSF are hollow on the inside with a poplar frame assembled with corrugated fasteners. The maximum number of panels that can be constructed is 25 panels per hour. The frame is constructed of poplar lumber that is first cut to length using a chop saw. Once the panel is framed it then has the exterior "skin" attached. The skin is made from ¼" Masonite cut to size on a table saw. The next step in panel fabrication is to drill pilot holes in both ends of the panel. After drilling the pilot holes the panel then has foil-faced fiberglass insulation attached. The final step is to cover the panel with fabric and attach the hardware.*

*The laminated products other than file cabinets manufactured by OSF are commonly referred to as flatwork. Flatwork production is limited to the 30-minute drying cycle in Glue Room. The flatwork includes work surfaces, countertops, end panels, flipperdoors and their end panels. A flipperdoor is an overhead storage cabinet with a cloth-covered front, laminated sides, and steel shelves. The flatwork is made from 1 1/8" and ½" particleboard. The laminate and backing is adhered to the particleboard. After the laminate is adhered to the particleboard the stock is then transferred to the horizontal panel saw to be cut into smaller pieces prior to being cut to its finished size.*

*The next stage of fabrication for flatwork is contingent upon the product being fabricated. All 1 1/8" stock will be sent to have a groove routed in the side of the stock so that t-mold can be attached. Once the 1 1/8" stock is routed and has the t-mold attached it is complete.*

*The ½" stock is routed on a router table. If the item being produced is an end panel then the item would be complete after t-mold and hardware is attached. Additional steps are required to complete a flipperdoor front. A flipperdoor front would then be taken to have the fabric adhered and hardware attached. Once the fabric is adhered and the hardware attached the flipperdoor is complete.*

*The final item manufactured by OSF is a laminated file cabinet. The shell of the cabinet is made from ¾" particleboard that is cut to shape using a vertical panel saw. Prior to the*

*shell being assembled the sides and tops have to be routed to ensure a snug fit. This routing is done on a router table. The shell of the cabinet is assembled with wood glue and staples. After the shell of the cabinet has been assembled it is taken to the Boxfile Fabrication Area to have the laminate adhered. Once the laminate is adhered the cabinet is returned to Boxfile Fabrication & Assembly Area to have the drawers installed. The drawers are made from ½” birch plywood. The next step is to dovetail the drawers. The drawers are assembled with wood glue. The drawer fronts are laminated with an Edge Bander. The cabinet is complete once the drawer fronts are attached to the drawers and the drawers aligned inside the shell.*

- b. How many (and %) of offenders work for MVE at this site?

*NECC Office Systems Factory currently employs 50 offender workers. This number varies slightly with the volume of production at any given time. The maximum total is roughly 3% of the NECC population.*

- c. Who are the customers for those products?

*NECC OSF produces its products and sells them to various State departmental agencies, cities, counties and to the Arkansas Department of Corrections.*

- d. What skills are the offenders gaining to help them when released back to the community?

*The factory has numerous skills that offenders may gain through employment.*

*First, working at NECC OSF helps offenders develop good habits through developing strong work ethics, proper hygiene, and courteous behavior towards staff and other offenders.*

*Second, we offer a Workplace Essential Skills course where each offender has the opportunity to learn necessary skills to obtain employment upon release. These include but are not limited to:*

- 1. Filling out a résumé.*
- 2. Presenting one's self at an interview.*
- 3. Developing communication skills.*
- 4. Basic reading, writing and math skills.*

*Finally, there is a United States Department Of Labor Apprenticeship Program in place that offers offenders certification of their skills through the DOL. This program is an ongoing project that offers offenders who are employed for extended periods a legitimate certification that can be used to obtain employment upon return to the community.*

## **7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? *Yes*

- b. How many offenders are seen in chronic care clinics? *1,623*

- c. What are some examples of common medical conditions seen in the medical unit?

*Cardiovascular, Asthma, Diabetes, Seizures, Chronic Pain and Hepatitis C.*

- d. What are you doing to provide health education to offenders?

*Pamphlets, Visit encounters*

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

*No*

- f. Is the aging of the population effecting health care in prisons as it is affecting health care every where else? If yes, please explain



*Aging offenders often require special care and greater attention from the Medical staff due to increasing forgetfulness and the inability to care for themselves. 'Round the clock care is needed for offenders who are incapacitated.*

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?

*When an offender has a mental health concern, they complete an MSR requesting to be seen by Mental Health staff. Offenders are also referred to Mental Health by Medical, custody and classification staff when they feel there is a mental health concern. When an offender is in crisis (death in the family, panic attack, etc.) he can come to Medical and request to see a Mental Health staff member. If a Mental Health staff member is on site and available, he/she will meet with the offender.*

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

*There were no successful suicides in the past year. If an offenders states he is suicidal, or if any staff member believes that an offender is suicidal, the offender is placed on suicide watch and is subsequently evaluated by a Mental Health staff member. Mental Health staff members provide suicide prevention training to staff members during their annual CORE training.*

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

*As of November 1, 2012, there were 379 offenders prescribed a psychotropic medication, which is 18% of the population at this institution.*

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

*As of November 28, 2012 we have 292 offenders in the Mental Health Chronic Care Clinic at NECC. Of those offenders, 285 have a mental health score of a 3; six have a mental health score of a 4. Five of those who have a mental health score of are also on involuntary medication status. All offenders in the Mental Health Chronic Care Clinic are seen by a qualified mental health professional at least once per month and more often if necessary. Offenders with a mental health score of a 3 are seen by the psychiatrist at least every 90 days for medication evaluation. Offenders who are on involuntary medication status are seen by the psychiatrist at least every 14 days for medication evaluation.*

9. What is your greatest challenge in managing this institution?

*Filling and keeping front line supervisory positions full, as well as past staffing cuts in line staff positions.*

10. What is your greatest asset to assist you in managing this institution?

*Experience staff who step in and share the workload when needed.*

11. What is the condition of the facility's vehicle fleet? (mileage, old vehicles, etc?)

*Overall our fleet is in fair condition, with 4 vehicles over 200,000 miles and 15 vehicles over 100,000 miles. Our fuel economy ranges from 9mpg to 32mpg, with a combined average of all vehicles at 18.5mpg. The model ages of the vehicles range from 1996 to 2009 (our oldest vehicle is a 1996 Chevrolet P/U Truck and newest a 2009 Ford Crown Victoria). Vehicle mileage ranges from 19,900 to 232,600 with our Inmate transportation bus being the highest.*

*NECC classifies its vehicles as follows:*

*Vehicle Perimeter Patrol: 3 vehicles and one specialty 4WD vehicle for inclement weather*

*Inmate transportation: 18 vehicles including a handicap van and a large capacity transportation bus.*

*Staff pool vehicles: 3 Vehicles used for transporting staff members to training or special job duties.*

*Maintenance/ Specialty Vehicles: 7 vehicles used for maintaining institution (snow removal, Dump trucks, pulling heavy loads)*

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

*“After much thought, I come to the conclusion that morale is on the low-medium side of the Morale Meter. The reason it is not higher is due to the following:*

- 1. Breakdown of the family structure*
- 2. The economics of the past 10 years*
- 3. The cutbacks in staffing / greater workloads due to increased programming”*
- 4. Continued increase of cost for medical insurance with less benefits*
- 5. Lack of pay raises*

**13. Caseworkers:**

- a. How many caseworkers are assigned to this institution?

*NECC has 22 caseworkers*

- b. Do you currently have any caseworker vacancies?

*None*

- c. Do the caseworkers accumulate comp-time?

*No*

- d. Do the caseworkers at this institution work alternative schedules?

*No. They all work a 8-4:30 shift.*

- e. How do inmates gain access to meet with caseworkers? *Offenders write to their caseworker for an appointment or an open door period is conducted every Wednesday, offenders can access their caseworker during these times with out appointments.*

- f. Average caseload size per caseworker?

- *# of disciplinary hearings per month? An average of 20 per month*
- *# of IRR's and grievances per month? An average of 9 per CCM per month*
- *# of transfers written per month? An average of 6 per CCM per month*
- *# of re-classification analysis (RCA's) per month? Approximately 17 RCA's and 18 TAP's are completed per CCM per month.*

- e. Are there any services that you believe caseworkers should be providing, but are not providing?

*No*

- f. If so, what are the barriers that prevent caseworkers from delivering these services? *N/A*

- g. What type of inmate programs/classes are the caseworkers at this institution involved in?

*AIC's, Puppies for Parole, PACT, Hospice, Anger Management, ICVC, ICTC, Criminal thinking, Pathways to Change, Inside-Out Dads*

- h. What other duties are assigned to caseworkers at this institution?

*As previously mentioned, CCM's complete TAP's for offenders at the time their RCA's come due. CCM's also review offender files for accuracy, respond to emergencies, assist custody staff when needed, assist other housing units when staff are on vacation or extended leave to ensure that work is completed in a timely manner, and other tasks as assigned to ensure the institution is run at optimum efficiency.*

**14. Institutional Probation and Parole officers:**

- a. How many parole officers are assigned to this institution?  
*NECC has five Institutional Parole Officers and one Unit Supervisor*
- b. Do you currently have any staff shortages?  
*No*
- c. Do the parole officers accumulate comp-time?  
*No*
- d. Do the parole officers at this institution flex their time, work alternative schedules?  
*Four Institutional parole Officers work five days a week, eight hours a day. Arrival times vary from 7:00am to 7:30am. One Institutional Parole Officer works four ten-hour days. With prior approval from the Unit Supervisor, staff are allowed to flex their schedules within that week.*
- e. How do inmates gain access to meet with parole officers?  
*All offenders can use the "kite" system and write their Institutional Parole Officer a note that is reviewed by the IPO. The offender either receives a reply by mail or he is put on a call-out to see his Institutional Parole Officer. Officers also have call-outs for offenders they need to see to complete a report, home plan, or to deliver written responses, etc. At the present time, the IPO's go to the offenders assigned to treatment, the reception and orientation wings, and those assigned to segregation. Appointments are made with staff to use office space in each of these sections.*
- f. Average caseload size per parole officer? *Approximately 419*  
# of pre-parole hearing reports per month? *Approximately 46 per month*  
# of community placement reports per month? *Approximately 5 per month*  
# of investigation requests per month? *Approximately 24 per month*
- g. Are there any services that you believe parole officers should be providing, but are not providing?  
*Resources for housing offenders with medical and mental health needs and sex offenders*
- h. If so, what are the barriers that prevent officers from delivering these services?  
*Barriers include funding and appropriate housing for offenders with mental health and medical needs, as well as for sex offenders, for placement across Missouri. We need more residential placements like the Reality House in Columbia in other parts of the state.*
- i. What type of inmate programs/classes are the parole officers at this institution involved in?  
*Because of changes in workload, we are not currently involved in any programs. We are working on an informational paper to give to offenders during orientation to help them prepare for a parole hearing. At NECC, one staff person oversees the 64-bed treatment program, Another institutional Parole Officer oversees the Parole Officer*

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

*Employee Benefits*

16. Does your institution have saturation housing? If so, how many beds?

*NECC does not have saturated housing at this time.*

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition?  
*383 working radios*
- b. Do you have an adequate supply of batteries with a good life expectancy?  
*Yes, 766 batteries on site*

c. Are the conditioners/rechargers in good working order?

*Yes. The units are new, as NECC recently transitioned to a new radio system entirely. The new radios should be more reliable than those formerly used.*

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name:	Ozark Correctional Center			
Custody Level	C2		Warden	Ed Davis
Total Acreage	80		Address	929 Honor Camp Lane
Acreage w/in Perimeter	12			Fordland, MO 65652
Square Footage	166,185		Telephone:	417-767-2606
Year Opened	1963		Fax:	417-767-2014
Operational Capacity/Count (as of November 30, 2012)				
General Population Beds (capacity and count as of November 30, 2012)	650		Deputy Warden	Offender Management Brian O'Connell
Segregation Beds (capacity and count as of November 30, 2012)	16		Deputy Warden	Operations Stacy Kleier
Treatment Beds (capacity and count as of November 30, 2012)	650		Asst. Warden	
Work Cadre Beds (capacity and count as of November 30, 2012)	0		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	650		Major	Johnny Burkdoll
Protective Custody Beds (capacity and count as of November 30, 2012)	0			

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?

**OCC is an older facility, with a few areas in poor to fair condition, but overall in good condition. Steady improvements have been made to infrastructure and buildings over the years. A perimeter camera system was installed in the last three years. A wastewater treatment upgrade with a new clarifier to lower phosphate levels was completed in 2012, in addition to replacement of the radio system to a narrow band system. Improvements were also made to Recovery Hall, an area used primarily for treatment classes.**

- b. What capital improvement projects do you foresee at this facility over the next six years?

**The Del Norte fence alarm system is aging and is frequently down for repair, requiring a perimeter patrol vehicle during down time, resulting in the shortage of one staff person on each shift to remain inside the perimeter. A replacement system is in the design stage and is anticipated to be installed in 2013, which will address the concern with the present system.**

Presently offenders are strip searched in a trailer unit parked outside the perimeter of the institution. This is a security issue as offenders remain outside the institution after being searched, offering an opportunity for contraband to be introduced into the institution. Preliminary plans to construct a strip search building inside the perimeter have proved to be too costly to be done as an in house construction project, thereby falling in the category of a needed capital improvement.

Electrical Service to our institution and throughout the buildings is insufficient for modern business use. Present service pre-dates computers, video and most modern business use. All buildings including the Housing Units, are maxed out on circuits used and panel boxes. We are also susceptible to power surges and lightning strikes. A lightning strike in October 2012 did extensive damage to the perimeter camera system and backup power for the Control Center. A thorough electrical needs audit and service upgrades are necessary.

- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
**Replacement of the fence alarm system to ensure security is currently being addressed. Improvements to the electrical services and replacement of the strip trailer, while important to daily operations, do not impact long-term sustainability to the same degree as recent improvements made in the radio system and wastewater treatment plant.**

## 2. Staffing:

- a. Do you have any critical staff shortages? **No**
- b. What is your average vacancy rate for all staff and for custody staff only?  
**10% total vacancy and 22% custody**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
**The most impact is with custody staff. The supervisors have to manage time closely in order to assure adequate coverage. Very little impact otherwise.**
- d. What is the process for assigning overtime to staff?  
**OCC has minimal overtime accrual which is usually due to unique circumstances requiring holding over existing custody staff, i.e. transportation/medical runs. If the need would arise to assign overtime to staff, OCC would do so in accordance with union agreements.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?  
**Approximately 70% is utilized as time off and 30% is paid-off**
- f. Is staff able to utilize accrued comp-time when they choose?  
**Generally, except for custody staff; and with custody, we try to work with staff as much as possible.**

## 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?  
**170 offender students that is 27% of the population**
- b. How many (and %) of inmate students earn their GED each year in this institution?  
**2012 – 73/94.81%    2011 – 62/84.9%    2010 – 61/88%**
- c. What are some of the problems faced by offenders who enroll in education programs?  
**Learning Disabilities, Long Term Drug Abuse, Bad Experiences in school in the Past and Time restraints (offenders are only here 1 year).**

4. **Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?

**Modified Therapeutic Community is provided by Gateway Foundation as contracted through the Missouri Department of Corrections.**

- b. How many beds are allocated to those programs? **650**

- c. How many offenders do those programs serve each year?

**650 (it is a one year program)**

- d. What percent of offenders successfully complete those programs? **87.25%**

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

**Prison settings tend to support a prison culture. It is difficult for staff and clients to break away from the mold of the prison stereotype; yet, everything needed to re-enter society and remain free, clean, sober and social is decidedly "un-prison". Bridging the gap between the setting and the message is the greatest challenge in prison based treatment services.**

5. **Vocational Programs: N/A**

- a. What types of vocational education programs are offered at this institution?

- b. How many offenders (and %) participate in these programs each year?

- c. Do the programs lead to the award of a certificate?

- d. Do you offer any training related to computer skills?

6. **Missouri Vocational Enterprises: N/A**

- a. What products are manufactured at this institution?

- b. How many (and %) of offenders work for MVE at this site?

- c. Who are the customers for those products?

- d. What skills are the offenders gaining to help them when released back to the community?

7. **Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?

**Yes we are NCCHC Accredited**

- b. How many offenders are seen in chronic care clinics?

**329 offenders in chronic care clinics**

- c. What are some examples of common medical conditions seen in the medical unit?

**Wounds, boils, common colds, hay fever/allergies, athletes foot, back pain, Strains and sprains, toothaches**

- d. What are you doing to provide health education to offenders?

**Monthly education classes, education board in the medical unit, chronic care Education to chronic care offenders and yearly health fair**

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No active Tuberculosis Cases**

- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

**No, aging is not effecting health care at OCC.**

8. **Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?

**Offenders arriving with MH3 score are scheduled upon arrival, any offender may obtain MH services by submitting a MSR**

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

**No successful suicides at OCC, Education is provided to all staff and open communication between staff.**

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

**81 offenders or 12.48% are taking psychotropic medication**

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

**There are 110 chronic care offenders. Chronic care offenders have monthly counseling, medication and medication management and staff availability in crisis.**

9. What is your greatest challenge in managing this institution?

**Limited budget for upkeep of an older facility, and the lack of adequate space for programming that is required under our contract with the Gateway Foundation.**

10. What is your greatest asset to assist you in managing this institution?

**We are very fortunate to have been able to recruit and retain exceptional staff, especially supervisory staff. All OCC staff are committed to the mission of long-term treatment, and to the therapeutic community model.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

**High mileage; fair to good condition. We are in need of a handicapped vehicle, as we do serve wheelchair-bound offenders.**

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

**The morale of the majority of custody staff is high.**

13. **Caseworkers:**

A. How many caseworkers are assigned to this institution? **8**

B. Do you currently have any caseworker vacancies? **No**

C. Do the caseworkers accumulate comp-time?

**Typically, any overtime worked is flexed out within the week. Current overtime Balances reflect overtime accumulated on last working day of week, holiday on RDO and/or inability to flex during the week.**

D. Do the caseworkers at this institution work alternative schedules? **Four ten hour days**

E. How do inmates gain access to meet with caseworkers?

**Case Managers generally use an open-door policy**

F. Average caseload size per caseworker? **92**

• # of disciplinary hearings per month? **55**

• # of IRR's and grievances per month? **Average is 16 IRR's and 4.5 Grievances**

• # of transfers written per month? **5**

• # of re-classification analysis (RCA's) per month? **105**

G. Are there any services that you believe caseworkers should be providing, but are not providing?

**No**

H. If so, what are the barriers that prevent caseworkers from delivering these services?



- I. What type of inmate programs/classes are the caseworkers at this institution involved in?  
**Pathway to Change, UMOS, Incarcerated Veteran Services, Missouri Career Center Career Readiness, Medicaid Pre-Release, Puppies for Parole, Therapeutic Community Structure Team, Community Work Release**
- J. What other duties are assigned to caseworkers at this institution?

**We have several Case Managers that are staff trainers (AICS, Pathway to Change)**

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? **3**
- B. Do you currently have any staff shortages? **No**
- C. Do the parole officers accumulate comp-time? **Rarely**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **If Needed**
- E. How do inmates gain access to meet with parole officers? **Open Door in Housing Units**
- F. Average caseload size per parole officer? **Approximately 217 per officer**
- # of pre-parole hearing reports per month? **2-3 (Not including Court Reports)**
  - # of community placement reports per month? **0-1**
  - # of investigation requests per month? **Approximately 10**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the parole officers at this institution involved in?  
**Orientation**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

16. Does your institution have saturation housing? If so, how many beds?

**Yes 14 beds**

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? **188**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **Yes**

## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name: <b>Potosi Correctional Center</b>				
Custody Level	<b>C-5</b>		<b>Warden</b>	<b>Troy Steele</b>
Total Acreage	<b>128.77</b>		<b>Address</b>	<b>11593 State Highway 0 Mineral Point, MO 63660</b>
Acreage w/in Perimeter	<b>35</b>			
Square Footage	<b>314,663</b>		<b>Telephone:</b>	<b>573-438-6000</b>
Year Opened	<b>1989</b>		<b>Fax:</b>	<b>573-438-6006</b>
Operational Capacity/Count (as of November 30, 2012)	<b>903/897</b>			
General Population Beds (capacity and count as of November 30, 2012)	<b>584/580</b>		<b>Deputy Warden</b>	<b>Fred Johnson Deputy Warden Offender Management</b>
Segregation Beds (capacity and count as of November 30, 2012)	<b>146/135</b>		<b>Deputy Warden</b>	<b>Cindy Griffith Deputy Warden Operations</b>
Treatment Beds (capacity and count as of November 30, 2012)	<b>SNU 46/46</b>		<b>Asst. Warden</b>	<b>Jamie Crump</b>
Work Cadre Beds (capacity and count as of November 30, 2012)	<b>90/84</b>		<b>Asst. Warden</b>	
Diagnostic Beds (capacity and count as of November 30, 2012)	<b>N/A</b>		<b>Major</b>	<b>Greg Dunn</b>
Protective Custody Beds (capacity and count as of November 30, 2012)	<b>46/46</b>			

#### **1. Capital Improvement Needs:**

A. How would you rate the overall condition of the physical plant of the institution?

**The overall condition of the physical plant is considered fair.**

B. What capital improvement projects do you foresee at this facility over the next six years? **Four of six Capital Improvement Projects remain that were submitted to the Construction Unit on June 25, 2004. The following are the projects submitted in order of site priority.**

**1) Replace electronic door control system.**

**2) Renovate showers and restrooms and replace 4 each HVAC units at Minimum Security Unit.**

**3) Seal outer walls and upgrade exhaust systems in the Housing Units to stop excessive moisture and humidity.**

**4) Install 2" asphalt overlay on existing roads and parking lots. (Perimeter Road completed)**

C. How critical do you believe those projects are to the long-term sustainability of this facility? **All of the above listed projects are important to either the security or operation of this facility. #1 – Door controls are critical to safety and security. The current system is outdated and not supported. At this time we are able to maintain this system by repairing electronic cards. #2 –**

**Toilet and shower facilities are not adequate for the number of offenders housed in Housing Unit 7. Some items were upgraded during the recent ESCO water conservation project. #3 – There is a considerable amount of humidity created in the housing units during the heating season. The system was originally designed for one offender per cell but was increased to two offenders in the 1990s. #4 – Perimeter roads have been repaved. The parking lot is in poor condition and deteriorates more each year. We are currently patching major potholes as needed.**

**2. Staffing:**

A. Do you have any critical staff shortages?

**No. Although the average number of official vacancies is relatively low, overall staffing numbers have been reduced over the past few fiscal years. Numbers of corrections officers have been reduced by about 10% over the past four years. Staffing number reductions keep staffing far below desirable numbers.**

B. What is your average vacancy rate for all staff and for custody staff only?

**2.2% All staff                      2.1% Custody staff**

C. Does staff accrual or usage of comp-time by staff effect your management of the institution?

**With fiscal constraints as they are, there is continuous calculating of safety risk (staff on duty) versus fiscal responsibility. Keeping a safe number of staff on site while being fiscally responsible is a continuous and fluid effort. Also, during staffing patterns that have been reduced to the current level, it is more common that an employee wishing to use accrued time would be denied a particular date(s).**

D. What is the process for assigning overtime to staff?

**Volunteers are sought first, if there are no volunteers (or inadequate numbers), shift supervisors move to a mandatory revolving list to assign OT.**

E. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

**Over the course of the year, the ratio is near 50/50, early in the year people tend to accrue for vacations, then later in the year; they seek more pay-out.**

F. Is staff able to utilize accrued comp-time when they choose?

**In general, staff utilize comp-time at their choosing, but as with any time-off, it is dependent on the date(s) selected and overall staffing number for those particular dates.**

**3. Education Services:**

A. How many (and %) of inmate students at this institution are currently enrolled in school?

**The Education Department was removed from PCC in June 2005. We do, however, have a class sponsored by two VIC's for offenders to earn their GED. The VIC's come in to supervise the program. We currently have 20 (.022%) offenders enrolled.**

B. How many (and %) of inmate students earn their GED each year in this institution?

**5 (.005%)**

C. What are some of the problems faced by offenders who enroll in education programs?

**Small class sizes due to it being instituted and instructed by VIC's, as well as limited classroom time due to the VIC instructors.**

**4. Substance Abuse Services:**

A. What substance abuse treatment or education programs does this institution have?

**We offer N/A and A/A on a volunteer basis or as part of a program plan.**

B. How many beds are allocated to those programs?

**No beds are allocated for drug treatment offenders.**

- C. How many offenders do those programs serve each year?  
**N/A**
- D. What percent of offenders successfully complete those programs?  
**N/A**
- E. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?  
**Lack of qualified staff and volunteers to teach these programs, and no (staff) Substance Abuse Specialists allocated to DAI facility.**

**5. Vocational Programs:**

- A. What types of vocational education programs are offered at this institution?  
**The only vocational programs offered are by Missouri Vocational Enterprises (MVE), and they are on the job training hours.**
- B. How many offenders (and %) participate in these programs each year?  
**We currently have 26 (.028%) offenders participating in on the job training.**
- C. Do the programs lead to the award of a certificate?  
**No.**
- D. Do you offer any training related to computer skills?  
**Yes, Employability Skills/Life Skills & Basic Computer Skills.**

**6. Missouri Vocational Enterprises:**

- A. What products are manufactured at this institution?  
**Metal fabrication**
- B. How many (and %) of offenders work for MVE at this site?  
**There are currently 26 (.028%) offenders working at this site.**
- C. Who are the customers for those products?  
**State agencies, non-profit organizations and individual state employees all purchase products from MVE.**
- D. What skills are the offenders gaining to help them when released back to the community?  
**Offenders working at MVE Tube Bending Factory acquire various steel fabrication skills such as welding, steel tube bending, cutting, computer aided drafting & design, hydraulics, small machine set-up and operation, maintenance, and inspection. Offenders in clerical positions become proficient in accounting, planning and expediting of goods and services. Finally, all offender workers are required to take courses in computer literacy and workplace essentials (resume building, personal conduct in the workplace, time management, etc.)**

**7. Medical Health Services:**

- A. Is the facility accredited by the National Commission on Correctional Health Care?  
**The medical unit at PCC has been NCCHC accredited since February 1996. We received re-accreditation in 2011. The next survey should take place in the spring of 2014.**
- B. How many offenders are seen in chronic care clinics?  
**Currently there are 594 offenders enrolled in chronic care clinics. During FY'12 the physician had a total of 1,587 chronic care encounters. The number of chronic care enrollees continues to increase annually, with the cardiovascular chronic care clinic accounting for 35% of all chronic care encounters.**
- C. What are some examples of common medical conditions seen in the medical unit?  
**The medical unit handles a wide variety of illnesses, both acute and chronic. The most common acute illnesses include chest pain, lacerations, and orthopedic issues. The most common chronic illnesses are high blood pressure, Hepatitis C, and diabetes.**

D. What are you doing to provide health education to offenders?

**Education relating to the offender's current complaint is provided during all medical encounters. Additionally, an offender health fair is held annually for both general population and MSU offenders. The closed circuit television channel is utilized to provide offenders with health information and announcements**

**In 2011, the medical unit, in conjunction with the recreation department, initiated the Chronic Care Wellness and Fitness Program, where offenders with chronic illnesses receive education regarding nutrition, exercise, and weight control. These offenders are evaluated and an exercise routine is tailored to meet their needs. This program has been hugely successful and has resulted in weight loss and improved control of chronic illnesses (blood pressure, blood sugar, cholesterol, etc).**

E. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

**There have been no active cases of tuberculosis at Potosi Correctional Center.**

F. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.

**The prison population is an aging population. Most correctional centers are not designed with the elderly offender in mind. While a certain number of handicapped cells are available statewide, there aren't enough to accommodate the handicapped and the elderly. Many infirmary beds statewide are filled with elderly patients who cannot function in the general population. The need for these skilled nursing beds has drastically reduced the number of beds available for acutely ill patients. Housing of the elderly offender is not the only concern. These offenders have a variety of personal and healthcare needs that are very difficult to meet in this environment. Chronological age is an important consideration in this environment; however, knowing that most offenders' "physical age" is 10-15 years older than their chronological age, greatly increases the number of people who fall into this aging population. As the population continues to age, the need for a skilled nursing center/long term care center within a correctional center becomes more evident. The recent opening of Enhanced Care Units in the state has provided some relief to this population; however, there is a greater need than these units can meet at this time.**

## **8. Mental Health Services:**

A. How do offenders go about obtaining mental health treatment services?

**Medical Services Request (MSR); Referral from medical physician; referral from Qualified Mental Health Professional (QMHP); or if classified as a need by Diagnostic Reception Center when entering Department of Corrections.**

B. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

**There were 2 SR-3's (serious attempts requiring medical treatment) this year. We continue to take advantage of the installed cameras in HU#1 and HU#2. We also work with training to offer suicide intervention classes for ALL staff.**

C. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

**239 offenders total (26%)**

D. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

**As mentioned above, we currently have 239 offenders who are being prescribed psychotropic medications. Currently, we have approximately 224 in the chronic care case load which**

reflects 15 who are being monitored after medications have been discontinued (d/c'd) or who are in our Special Needs Unit (SNU) that do not take any medications. Of those that are not in SNU, they will be monitored for a period of time and discharged from chronic care clinic if they remain stable. Of the 239 we currently have 16 who are on involuntary medication status which is reviewed every six months. All offenders are seen by the Qualified Mental Health Professional (QMHP) every 30 days. MH – 4's are seen by the psychiatrist every 30 days, and MH-3's are seen by the psychiatrist every 90 days. Those on involuntary medications are seen by the psychiatrist every 2 weeks and those in SNU are seen by the psychiatrist every 30 days.

9. What is your greatest challenge in managing this institution?

**Staffing:** Over the last several years with the cuts across the board we are down to essential staffing. With sickness, vacations and other issues we have fallen below these allocations which results in instituting critical staffing patterns for safety and security. Funding cuts in operational/maintenance budgets were detrimental not only in maintaining the physical structure of the institution but the vehicle fleet as well.

10. What is your greatest asset to assist you in managing this institution?

**Staff.** We have dedicated staff that even with the cuts are willing to go up and above their job expectations to ensure tasks are completed.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **Fair.** Below is a listing of the 19 vehicles in the fleet with current mileage and condition of the vehicles.

LICENSE #	ASSIGNMENT	MILEAGE	STATUS
13-0400	SECURE/1999 Ford	137620	Fair
13-0405	POOL/2000 Chevy	113142	Fair
13-0408	DUMP TRUCK/1988 GMC	20774	Poor
13-0409	SECURE/2001 Ford	118287	Fair
13-0412	VP/1997 Ford	155982	Fair
13-0417	PICKUP/1989 Dodge	85265	Poor
13-0051	VP/2002 Ford	137336	Fair
13-0882	VP/1992 JEEP	107149	Fair
13-0231	7 House/1999 Ford Van	126755	Fair
32-0278	SECURE/2008 Chevy	67263	Good
13-0284	CTU SECURE /2006 Ford	144891	Good
13-0411	CTU HANDICAP VAN	Located at ERDCC	Unknown
13-0723	POOL/2007 Ford	83470	Good
13-0780	SECURE/2004 Ford	146080	Good
13-0786	SECURE/2007 Ford	79442	Good
13-0796	SECURE/2006 Ford	109528	Fair
13-0810	SECURE VAN/2005 Ford	30900	Good
32-0281	MAIL VAN/2008 Chevy	178441	Fair
13-0898	BOX TRUCK- MVE/FORD	79525	Good

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.

The morale of the custody staff is perceived to be "on the low end of medium". PCC has been through significant changes in a relatively short time period. However, morale has improved over the last year, as staff are starting to recognize that most of those changes have yielded some very positive results. Also, the morale of custody staff parallels the morale of the general staff, and overall, morale has been negatively impacted by reductions of employee benefits.

**There have been a number of staffing reductions. Health insurance benefits have been reduced but the premiums have increased. The effect is, employees are doing more for less.**

**13. Caseworkers:**

A. How many caseworkers are assigned to this institution?

**11**

B. Do you currently have any caseworker vacancies?

**No**

C. Do the caseworkers accumulate comp-time?

**No**

D. Do the caseworkers at this institution work alternative schedules?

**Yes**

E. How do inmates gain access to meet with caseworkers?

**In-wing officer hours**

F. Average caseload size per caseworker?

**90**

• # of disciplinary hearings per month?

**289**

• # of IRR's and grievances per month?

**100**

• # of transfers written per month?

**26**

• # of re-classification analysis (RCA's) per month?

**90**

G. Are there any services that you believe caseworkers should be providing, but are not providing?

**No**

H. If so, what are the barriers that prevent caseworkers from delivering these services?

**N/A**

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

**Impact of Crime on Victims, Anger Management, Pathway to Change, Anthony Robbins, Computer Basics, Employability Skills/Life Skills, Inside out Dads.**

J. What other duties are assigned to caseworkers at this institution?

**Notary, work release crew checks, librarian coverage, re-entry services, Programs Coordinator, Grievance Officer, Puppies for Parole, Offender Photo and I.D. updates and assisting custody staff as needed.**

**14. Institutional Probation and Parole officers:**

A. How many parole officers are assigned to this institution?

**1 full time and 1 part time**

B. Do you currently have any staff shortages?

**No**

C. Do the parole officers accumulate comp-time?

**On occasion, but generally it is due to travel to/from trainings.**

D. Do the parole officers at this institution flex their time, work alternative schedules?

**Yes, with prior approval.**

E. How do inmates gain access to meet with parole officers?

**Open office held for Minimum Security/Work Release Unit, all other units send written correspondence and if requested to meet w/PO, the PO meets with them in the housing unit.**

F. Average caseload size per parole officer?

**The entire institution is shared between both, neither is assigned a specific caseload, both share in the responsibility.**

• # of pre-parole hearing reports per month?

**8**

• # of community placement reports per month?

**7**

• # of investigation requests per month?

**12**

- G. Are there any services that you believe parole officers should be providing, but are not providing?  
**Not necessarily services, but more involvement with re-entry and Transition Accountability Plan development.**
- H. If so, what are the barriers that prevent officers from delivering these services?  
**The caseload prevents extensive involvement with the above area, as well as, the majority of offenders transferring to lower custody camps once a release date is established. As PCC is a C-5 institution, it does not contain a transitional housing unit, where a vast majority of these services are provided.**
- I. What type of inmate programs/classes are the parole officers at this institution involved in?  
**There is no involvement for PO's at PCC, programs are covered by classification staff, as well as, the Chaplain and IAC.**
15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.  
**VEHICLE FLEET: The condition of the vehicle fleet remains a concern. The vehicles have high mileage and we are spending more in maintenance and repairs than some of the vehicles are worth. SALARY & BENEFITS: Raising insurance costs and no cost of living raises to subsidize have caused an additional hardship on staff and led to reduced morale. We continue to lose personnel to the city, other state and federal agencies as the pay structure for employees is substandard. LOCKING SYSTEM: The locking system and other internal security devices have deteriorated over the past 23 years and are becoming antiquated and the funding has not been made available to replace and/or update.**
16. Does your institution have saturation housing? If so, how many beds?  
**Effective January 1, 2010 forty-one (41) offenders were added as saturation to our operating capacity increasing it to 903.**
17. **Radio/Battery Needs:**
- A. What is the number of radios in working condition?  
**284**
- B. Do you have an adequate supply of batteries with a good life expectancy?  
**Yes**
- C. Are the conditioners/rechargers in good working order?  
**Yes, this is a brand new system.**



# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: South Central Correctional Center			
Custody Level	C-5	Warden	Michael Bowersox
Total Acreage	205	Address	255 W. Hwy 32
Acreage w/in Perimeter	45		Licking, MO 65542-9069
Square Footage	400,000	Telephone:	(573) 674-4470
Year Opened	2000	Fax:	(573) 674-4908
Operational Capacity/Count (as of November 30, 2012)	1692/1616		
General Population Beds (capacity and count as of November 30, 2012)	1152/1148	Deputy Warden	Terrena Ballinger
Segregation Beds (capacity and count as of November 30, 2012)	348/316	Deputy Warden	Roger Terry
Treatment Beds (capacity and count as of November 30, 2012)	0	Asst. Warden	Michele Buckner
Work Cadre Beds (capacity and count as of November 30, 2012)	192/151	Asst. Warden	N/A
Diagnostic Beds (capacity and count as of November 30, 2012)	0	Major	Anthony Williams
Protective Custody Beds (capacity and count as of November 30, 2012)	72/72		

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?  
*The overall condition of the physical plant of South Central Correction Center is average. The buildings are in need of paint; the roofs and pipes leak; metal doors are rusting; windows are cracked and their seals are broke and locking systems fail due to the amount of wear they are subjected to.*
- b. What capital improvement projects do you foresee at this facility over the next six years?  
*The Administration parking lot will be in need of paving within the next couple of years. SCCC currently seals the parking lot every other year. Replacement of all windows in the Custody Complex and Tower 1, Key Lock boxes in Key Issue of the Administration Building are and all entry door locks the Central Services building. The mobile office unit which currently houses our training department will require replacement within the next three(3) to four (4) years. The computers within the institution are in desperate need of upgrade/replacement.*
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
*It is critical to the safety and security of our institution to ensure all locks associated with the entry to our Central Services building are in excellent working condition due to the amount of use they receive daily. The windows in the Custody Complex and Tower 1 is*

*also extremely critical in large part due to the communication equipment housed within. The computer system is essential to the daily work flow of the institution.*

**2. Staffing:**

- a. Do you have any critical staff shortages? *SCCC currently has a Records Officer I position vacant with interviews scheduled for December 10, 2012 as well as one (1) COII position effective at the close of business today, and a Cook II position vacant with interviews on Wednesday, December 12, 2012.*
- b. What is your average vacancy rate for all staff and for custody staff only? *South Central Correctional Center's average vacancy rate for all staff is approximately forty (40). Of the total, approximately 26 were custody staff members.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? *The accrual and usage of compensatory time significantly impacts operations from a custody and food service staffing viewpoint and it negatively impacts staff morale. The accrual and usage of compensatory time by non-custody staff creates minimal impact.*
- d. What is the process for assigning overtime to staff?  
*Custody staff overtime assignment is outlined in the union agreement. Officers are first given the opportunity to volunteer. If there still remains a deficiency in meeting minimum staffing levels, the mandatory overtime list is utilized. The mandatory list requires the officer(s) at the top of the list to report for duty, if not currently on duty.*  
  
*Non-custody staff members are assigned overtime as needed for special assignments/circumstances. Non-custody staff that work ten (10) hour days accrue compensatory time when their regular day off falls on a paid holiday.*
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?  
*The accrual and usage of compensatory time significantly impacts operations from a custody and food service staffing viewpoint and it negatively impacts staff morale. The accrual and usage of compensatory time by non-custody staff creates minimal impact.*
- f. Is staff able to utilize accrued comp-time when they choose?  
*South Central Correctional Center makes every effort to flex off any earned overtime by both custody and non-custody staff members to minimize the accrual of compensatory time.*

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school? *There are approximately 320 offenders enrolled in school which is approximately 5.05% of the population at the institution.*
- b. How many (and %) of inmate students earn their GED each year in this institution? *Forty-two (42) offenders earned their GED during 2012, which is approximately 3.9% of the total offender population at SCCC.*
- c. What are some of the problems faced by offenders who enroll in education programs? *Lack of motivation and poor attendance due to being placed in Administrative Segregation is the most prominent problem faced by offenders.*

4. **Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have? *Not applicable.*
- b. How many beds are allocated to those programs? *Not applicable.*
- c. How many offenders do those programs serve each year? *Not applicable.*
- d. What percent of offenders successfully complete those programs? *Not applicable.*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? *Not applicable.*
- f.

5. **Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? *Not applicable.*
- b. How many offenders (and %) participate in these programs each year? *Not applicable.*
- c. Do the programs lead to the award of a certificate? *Not applicable.*
- d. Do you offer any training related to computer skills? *Not applicable.*

6. **Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?  
*The SCCC Furniture Restoration Factory is a two-phase operation within the Missouri Vocational Enterprises. The first phase is the new line manufacturing. In this phase we manufacture new furniture; for example, executive, conference room, and waiting room style chairs, couches, and tables from solid wood. The furniture, if necessary, can then be upholstered with fabric, vinyl, faux leather, or real leather. The second phase is furniture restoration. In this phase furniture is restored for courthouses, state departments, public schools, and libraries in addition to personal furniture for any state employee who requests refinishing. We have a set fee for manufactured items and the fee for restoration is based upon the item(s).*
- b. How many (and %) of offenders work for MVE at this site?  
*SCCC currently has 82 workers consisting of 5.28% of our population.*
- c. Who are the customers for those products?
- d. *Our customers are any Missouri State agency, Missouri State employee, or any Missouri non-profit organization.*
- e. What skills are the offenders gaining to help them when released back to the community?  
*MVE is an on-the job training program. The skills an offender is offered at the SCCC factory range from upholstery to woodworking/carpentry. There are also a few offenders who are afforded the opportunity to learn more advanced skills such as recordkeeping, clerical skills and small business operation. MVE is committed in creating relevant job training for offenders so they may become productive citizens. We strive to promote personal attributes, as well as, offering the offender job skills. At the same time, the offender must maintain proper institutional behavior and conduct in order to remain employed within the factory. The offenders in MVE receive special classroom training, which is from a PBS series titled "Workplace Essential Skills". This training will develop workplace skills in employment, communication and writing, math, and reading. This is presented from a VCR tape or CD. Computer literacy training will be offered from a CD (Jan's Illustrated Computer Literacy 101) and a stand-alone computer. Upon completion of these two programs, certificates are issued to the offender.*

7. **Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? *Yes.*

- b. How many offenders are seen in chronic care clinics? *Approximately 250-300 offenders are seen each month in chronic care clinics at SCCC.*
- c. What are some examples of common medical conditions seen in the medical unit? *The most common medical conditions seen in the SCCC Medical unit include colds/allergies, fungal infections, pain complaints, injuries (sprains/lacerations), GI complaints, and cardiac events.*
- d. What are you doing to provide health education to offenders? *SCCC offers one-on-one education from the nursing staff, provides information via the offender education channel, and hosts an annual health fair.*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? *No.*
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. *Yes, the aging population brings with it increased outcounts for hospitalizations for cardiac disease, liver disease, lung disease, kidney disease, and diabetes. Every attempt is made to provide care onsite, but aging brings on more acute bouts of illnesses needing more advanced care.*

#### 8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?  
*Offenders utilize an MSR for mental health treatment. They can be referred to mental health by custody staff, medical staff, or any other DOC staff.*
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?  
*There have been zero successful suicides at South Central Correctional Center during the past year. There are nine (9) suicide cells with one being a "padded cell". The mental health department also provides "close observation" to offenders in need of this intervention due to decompensation or other factors.*

*The mental health department has multiple interventions for the prevention of suicide. The department participates in CORE training and provides suicide prevention and mental illness classes multiple times throughout the year for staff members.*

*The offenders are afforded prevention and intervention strategies to include individual, grief and crisis counseling services as warranted. "You Can Prevent Suicide" posters are strategically placed noting the warning signs and what to do if they suspect their self or another offender is at risk. Offenders may also "self declare" a mental health emergency.*

*Group therapy regarding Depression, Anger Management, and Coping also serve as points of assistance, prevention, and intervention.*

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? *There are 148 offenders-9.2 % at SCCC who are currently taking psychotropic medications.*
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? *There are 182 offenders at South Central Correctional Center who are currently documented as chronically, mentally ill (MH3 or above). The chronically mentally ill are systematically seen by the psychiatrist based upon their mental health level i.e., MH03 (at least once every thirty (90) days and MH04 (once every 14 days). The institution has twelve (12) MH04'S of which nine (9) are on Involuntary Medications. Upon arrival an Intake*

***Evaluation and Individual Treatment Plan is completed. The treatment Plan is reviewed by a treatment team and updated as needed but no later than every six months. Counselors are required to see Chronic Care Clinic offenders at least once every thirty days. All offenders placed on Suicide Watch or Close Observation status require twenty-four hour monitoring and are seen daily until resolution of the presenting issues. Offenders that remain on Suicide Watch for over three days (72 hrs) are considered for a higher level of care. Offender cases that meet criteria are forwarded to the Special Needs Unit (SNU), Social Rehabilitation Unit (SRU), or the Secure Social Rehabilitation Unit (SSRU) for consideration for admissions.***

9. What is your greatest challenge in managing this institution?

***Personnel matters are sometimes the greatest challenge.***

10. What is your greatest asset to assist you in managing this institution?

***Our staff is also the greatest asset in assisting with the managing of SCCC.***

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

***SCCC has twenty-seven (27) working vehicles and one (1) non-functional vehicle. The oldest is a 1998 Ford van. Most are 2005 and newer. Nine (9) vehicles in our fleet have over 100,000 miles on them.***

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation.

***South Central Correctional Center's Chief of Custody assesses the morale of the custody staff at medium. The state of the staff's morale is due in large part to the increased cost of living.***

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

***SCCC has nineteen (19) Case Managers and two (2) Correctional Classification Assistants.***

B. Do you currently have any caseworker vacancies?

***SCCC currently does not have any vacancies.***

C. Do the caseworkers accumulate comp-time?

***Occasionally in rare circumstances.***

D. Do the caseworkers at this institution work alternative schedules?

***Yes, some work 4-10 hour shifts while others work 5-8 hour shifts.***

E. How do inmates gain access to meet with caseworkers?

***Through office hours Monday through Friday as well as by written request.***

F. Average caseload size per caseworker? ***144***

- # of disciplinary hearings per month? ***30***
- # of IRR's and grievances per month? ***20***
- # of transfers written per month? ***20***
- # of re-classification analysis (RCA's) per month? ***30***

G. Are there any services that you believe caseworkers should be providing, but are not providing?  
***None.***

H. If so, what are the barriers that prevent caseworkers from delivering these services?

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

***Pathways to Change, Anger Management, ICVC, Restorative Justice***

J. What other duties are assigned to caseworkers at this institution?

*Provide Offender Notary Services*  
*Classification Hearings*  
*Transitional Accountability Plans*  
*Offender Property Processing*  
*Offender Legal Mail*  
*Processing Green Checks*  
*AICS/RCA's*  
*Re-entry Services*  
*Offender Birth Certificates/Social Security Cards/DOR Identification*  
*Staff Training*  
*Work Release Screening/Applications*  
*Security Inspections*  
*Assist Custody Staff*  
*Answering offender correspondence*  
*Answering phone calls from offender family members*  
*Conducting Offender Classification file audits*  
*Submitting Requests for Investigation*  
*Writing and Interviewing Offender Conduct Violations*

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? **2**
- B. Do you currently have any staff shortages? **No.**
- C. Do the parole officers accumulate comp-time? **No.**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **No.**
- E. How do inmates gain access to meet with parole officers? **Open office hours and written correspondence.**
- F. Average caseload size per parole officer? **791 offenders per officer.**
  - # of pre-parole hearing reports per month? **Each officer prepares an average between ten (10) and (15) fifteen pre-parole hearings each month.**
  - # of community placement reports per month?
  - # of investigation requests per month? **Each officer completes an average of fifteen (15) investigative requests per month.**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **SCCC probation and parole officers currently provide all essential departmental services currently available.**
- H. If so, what are the barriers that prevent officers from delivering these services? **Not applicable.**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **None.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **SCCC does not have any other issues to discuss with or bring to the attention of the members of the Joint Committee on Corrections.**

16. Does your institution have saturation housing? If so, how many beds? **No**

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? **SCCC currently has 478 radios in working condition.**

- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes.**
- c. Are the conditioners/rechargers in good working order? **Yes.**

## **Joint Committee on Corrections**

**November 30, 2012**

### **Information for Legislative Institutional Visits**

Facility Name: <b>Southeast Correctional Center</b>			
Custody Level	<b>C-5</b>	Warden	<b>Ian Wallace</b>
Total Acreage	<b>120</b>	Address	<b>300 E. Pedro Simmons Dr.</b>
Acreage w/in Perimeter	<b>45</b>		<b>Charleston, MO 63834</b>
Square Footage	<b>391,880</b>	Telephone:	<b>573-683-4409</b>
Year Opened	<b>2001</b>	Fax:	<b>573-683-7534</b>
Operational Capacity/Count (as of November 30, 2012)	<b>1658/1629</b>		
General Population Beds (capacity and count as of November 30, 2012)	<b>1142/1132</b>	Deputy Warden	<b>Omer Clark (Operations)</b>
Segregation Beds (capacity and count as of November 30, 2012)	<b>242/241</b>	Deputy Warden	<b>Penny Milburn (Offender Management)</b>
Treatment Beds (capacity and count as of November 30, 2012)	<b>10/5</b>	Asst. Warden	<b>Bill Stange</b>
Work Cadre Beds (capacity and count as of November 30, 2012)	<b>192/164</b>	Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	<b>0</b>	Major	<b>Richard Gaines</b>
Protective Custody Beds (capacity and count as of November 30, 2012)	<b>72/67</b>		

#### **1. Capital Improvement Needs:**

- How would you rate the overall condition of the physical plant of the institution? **Very good.**
- What capital improvement projects do you foresee at this facility over the next six years? **1) The enhancement of the search area for HU7. Drugs, phones and contraband are problematic. 2) A classroom for HU7. In our minimum security work release unit education and training is a vital component for the Missouri Reentry Program and will enhance its effectiveness.**
- How critical do you believe those projects are to the long-term sustainability of this facility? **Very critical. 1) This will minimize the effect of drugs, contraband and criminal behavior in our institution. 2) As we phase into a three level custody institution, on-site training and education should be an integral part of our program/mission and security enhancement in HU7.**



## 2. Staffing:

- a. Do you have any critical staff shortages? **No**
- b. What is your average vacancy rate for all staff and for custody staff only? **19% All 23% Custody**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **No**
- d. What is the process for assigning overtime to staff? **This process is in line with the MOCOIA agreement. Volunteers are assigned initially. If staff do not volunteer, the mandatory overtime list is utilized.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **60% Paid 40% Used**
- f. Is staff able to utilize accrued comp-time when they choose? **Yes, depending on critical staffing needs, every effort is made to allow time off.**

## 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **26 1.6%**
- b. How many (and %) of inmate students earn their GED each year in this institution? **26 1.6%**
- c. What are some of the problems faced by offenders who enroll in education programs? **This is a volunteer led GED program at SECC with only one (1) volunteer currently conducting the classes. Some applicants lack the basic reading and writing skills. At present, there is no place and no funding available to implement a program for basic literacy.**

## 4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? **We currently have a 12 week substance abuse program led by staff and other offender facilitators which covers disease concept, medical and physical aspects, denial, recovery, relapse, addiction and the family, criminal personality, anger, stress management, better relation/effective communication, self esteem and values. This program is a pass or fail course, where offenders are participating in a series of bi-weekly tests and a final quiz at the end in order to successfully complete the program. We have an ongoing Alcoholics Anonymous program, which is led by Volunteers in Corrections (VICs) that meet four times a month.**
- b. How many beds are allocated to those programs? **N/A**
- c. How many offenders do those programs serve each year? **100**
- d. What percent of offenders successfully complete those programs? **70%**
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting? **Additional qualified instructors/facilitators are needed to run more class cycles in addition to updated materials, funding for material, attendance and unbiased selection.**

## 5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? **N/A**
- b. How many offenders (and %) participate in these programs each year? **N/A**
- c. Do the programs lead to the award of a certificate? **N/A**
- d. Do you offer any training related to computer skills? **N/A**

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution? **The MVE wood furniture factory at SECC produces 2 lines of high quality college dormitory furniture and a line of commercial/institutional cabinetry. These three lines of furniture includes, but are not limited to: beds, chairs, dressers, desks, wardrobes, night stands, kitchen and bathroom cabinets, pantries, shelving, athletic taping stations and cedar chests and other misc, furniture manufacture and repair. We also design and build “specials”, or those furniture pieces that are outside of our normal catalog items. Between January 1<sup>st</sup> and December 31<sup>st</sup>, 2012 MVE will have sold over 4400 pieces of quality furniture.**
- b. How many (and %) of offenders work for MVE at this site? **At peak production levels the factory is authorized to employ 115 offenders. Currently the factory employs 67 offenders, which translates to about 4.4 % of the level 5 population at SECC.**
- c. Who are the customers for those products? **Our customer base consists of tax supported agencies, non-profit organizations and state employees.**
- d. What skills are the offenders gaining to help them when released back to the community? **The offender work force at this MVE factory is trained in the basic necessities of obtaining and holding a job, scheduling, teamwork, communication, personal grooming, professional behavior, personal accountability, etc.**

**Some specific skills that can be acquired in this MVE location include but are not limited to the following:**

- **Machine set-up and operation**
- **Furniture making, cabinetry, assembly**
- **Furniture finishing, spray coating**
- **industrial maintenance, janitorial**
- **tool repair**
- **shipping and receiving, accounting, storekeeping**
- **office machine operations**
- **drafting and furniture design**
- **CNC router operation, maintenance and repair**
- **CNC panel saw; operation, maintenance and repair**
- **Offender workers at this factory are enrolled in courses of study including; “Workplace Essential Skills” and “Computer Literacy” in which the offenders can earn a certificate.**
- **other computer skills that include basic typing, Windows, Word, and Excel**

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?  
**Yes**
- b. How many offenders are seen in chronic care clinics? **Approximately 1200**
- c. What are some examples of common medical conditions seen in the medical unit?  
**Cardiovascular disease, hypertension, asthma, diabetes, chronic pain.**
- d. What are you doing to provide health education to offenders? **Education via appointments, pamphlets available in the medical unit and library, educational materials on the offender information channel, bulletin boards, monthly diabetes newsletter and annual health fair.**

- e. Have you had any cases of active Tuberculosis in this facility in the past year? **No active cases.** If so, how did you respond? **N/A**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? **Yes** If yes, please explain. **Several of our permanent offenders that live in the infirmary are aged and have limited capabilities. They live in our infirmary because they require some type of assistance 24 hours a day. They require assistance with eating, bathing, dressing and toileting.**

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services? **Offenders have several options in regards to obtaining mental health treatment services. The most commonly used methods to obtain services include:**
  - **Medical Services Request-MSR (all offenders)**
  - **Chronic Care Clinic (MH3/MH4; no request necessary)**
  - **Staff Referrals and/or Crisis Intervention (all offenders)**
  - **Segregation Rounds/Segregation Assessments (Rounds provided for all segregated offenders weekly; Assessments for all offenders in segregation at 30 days in segregation and every 90 days thereafter. Mental Health automatically schedules the appointment, no request necessary.)**

**All offenders have access to Medical Service Request (MSR) forms on a daily basis. If an offender is seeking mental health treatment (individual or group format), they complete an MSR stating their concern. MSR's are triaged daily by a nurse and the individual is automatically scheduled with the appropriate professional based on their individualized need.**

**If an offender has a current mental health diagnosis, they are enrolled in Chronic Care Clinic. All offenders are assigned a mental health score based on their level of mental health treatment needs. A rating of MH3 or above indicates that a person has a current mental health diagnosis and may additionally be on medication. Chronic Care Clinic consists of all offenders with a rating of MH3 or above. When someone is in Chronic Care Clinic, they are scheduled every month with a Qualified Mental Health Professional for follow up. They are additionally seen by a psychiatrist a minimum of every ninety (90) days. In addition, they are seen more frequently when involved in a transfer and/or discharge or if having more significant concerns. Offenders in Chronic Care Clinic are automatically scheduled for these appointments by mental health. If they need services in addition to the Chronic Care Clinic, they submit the MSR form as well.**

**Offenders with more acute symptoms requiring immediate attention, have the option of informing a staff member of their crisis situation and being seen for a crisis intervention session immediately. Additionally, a staff member noticing symptoms in an offender has access to a referral form and commonly refers offenders that they believe may need some mental health assistance. Depending on the nature of the staff referral, some individuals are seen immediately and others can be scheduled within the next few days.**

Staff members are trained regularly on Suicide Intervention/Prevention during their core training. In this training, staff members are taught what symptoms to look for to identify offenders with possible mental health needs including common indicators that a person may be considering suicide. Any staff member can place an offender on suicide precaution status if concerned that the offender may be suicidal. Mental Health provides 24 hour on call coverage to meet the needs of the institution 7 days per week.

All offenders in segregation are monitored more closely by mental health due to the isolation aspect of segregation. Mental health rounds are conducted on a weekly basis and all offenders in segregation are given the opportunity to talk with a mental health professional during this time. All offenders in segregation are assessed by mental health at 30 days in segregation and then every 90 days thereafter. Mental Health Staff automatically schedule these appointments for the offender, no request is necessary.

In conclusion, every effort is made in mental health to preserve the continuity of care for all offenders by providing for the easiest access to services possible. Whether it is through involvement in Chronic Care Clinic, counseling services, staff referrals, crisis intervention, segregation assessments, and/or mental health groups, all mental health services are readily available for offenders. Most can be easily accessed through the use of a readily available MSR form.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **No suicides occurred at SECC within the past year. Suicide prevention is a primary focus at SECC. Following any serious suicide attempt, a debriefing meeting is held to review the incident and make any necessary improvements as a result of the incident. All staff are educated on suicide prevention and intervention. Mental health staff facilitate a 3.5-4 hour training to all custody and non-custody staff during their core training week. Medical staff are provided this education during a specified monthly staff meeting set aside to provide education on suicide prevention. All staff have been provided a pocket card that lists signs/symptoms of a potentially suicidal person. The card is carried by the staff member so that it can be referred to when needed. In addition, mental health staff are continually attending trainings and reading literature on suicide prevention and working to improve overall suicide prevention within the institution.**

Any offender making statements of self harm or demonstrating suicidal predictors, are placed on suicide precautions where they can be monitored more closely. Any staff member can place an offender on suicide precautions. Mental health is always involved in this process. A Qualified Mental Health Professional assesses the person within two hours during normal business hours. After hours, Mental Health staff are notified and the offender is assessed the next business day. When someone is on suicide precautions, they are placed in a cell with minimal fixtures or protrusions. In HU1 we have cameras mounted in the cell to provide 24 hour observation of the offender. Additionally, custody staff members provide visual observation checks on these offenders at least every 15 minutes. Every effort is made to only provide the offender with items that can not be used to harm self until modifications are made by a qualified mental health

**professional. An offender can only be released from precautions by a psychiatrist, psychologist, and/or the chief of mental health services.**

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **Approximately 174 (10.72%)**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **On average, approximately 212 offenders at Southeast Correctional Center have a mental health diagnosis (MH3 or above). Of these, approximately 16 offenders are classified MH4 indicating that they have a chronic or severe mental illness. The majority, 196 offenders, are classified as MH3 indicating moderate mental health needs. The MH4 offenders are provided with an intensive treatment regimen that includes regular follow up monitoring averaging contact with a mental health professional a minimum of every two weeks. This contact is made through the various program components (ie- Chronic Care Clinic, groups, psychiatric appointments, follow up appointments, etc.).**

**There are specialty units available for offenders with special needs: Special Needs Unit, Social Rehabilitation Unit, Secure Social Rehabilitation Unit, Enhanced Care Unit, and Correctional Treatment Unit. If an offender fits the criteria for any of these units, a referral is made to get the person into the specific unit. If an offender is seriously mentally ill and requires more intensive crisis services then available on site (MH5), he is sent for further treatment at the Biggs Correctional Unit until stabilized.**

**All offenders have access to mental health services via MSR if additional services are needed. Pre-release planning is provided for continuation of care. MH4 Offenders who are paroling have the opportunity to be a part of the MH4 project which pays for a mental health assessment by the community mental health center prior to release so that the person will have comprehensive follow-up by the community once released.**

**As previously mentioned, all offenders MH3 and above are seen a minimum of monthly during Chronic Care Clinic and a minimum of every 90 days by the psychiatrist. Services are also provided per MSR form, when in segregation, and on a crisis and/or referral as needed. All Mental Health Clients have a Treatment Plan that is used to clarify their needs and goals. The treatment plan guides what services are needed. This plan is revised as the offenders goals are met or needs change. Thus, the services change as needs change.**

**In addition, Mental Health offers groups on a weekly basis. Most groups are available to everyone with the exception of a few groups that target a specific population. The following groups are available at this time with a wait list:**

- **Charting a New Course**
- **Adjustment to Incarceration**
- **Anger Management – (Low functioning, Average functioning, High functioning)**
- **Chronic Suicidal Thoughts/Suicidal Behaviors**
- **Dealing with Feelings**

- Depression
- Grief and Loss
- Responsible Parenting
- Sleep Hygiene
- Medication Management
- Cognitive Behavior Therapy
- Trauma
- Thinking Errors
- Understanding Mental Health with Symptom Management
- Aftercare Transition Group (Life After Release)
- Stress Management
- Activities for challenged offenders
- Personal Hygiene for low functioning offenders
- Relapse Prevention
- Effective Communication
- Decision Making
- Self Esteem for challenged offenders
- Anxiety Management

**Southeast Correctional Center Mental Health Department is allotted one part-time Psychiatrist and one part-time Psychiatric Nurse Practitioner. We are allotted three full-time licensed Qualified Mental Health Professionals, one part-time Psychologist, one full-time Psychiatric RN; one full-time Clerk, and one full-time Institutional Chief of Mental Health Services. The Mental Health Departments works very hard to exceed community standards and provide the best care possible.**

9. What is your greatest challenge in managing this institution? **Staffing Corrections Officer I's and Correction Officer II's. The hiring pool in Southeast Missouri is very limited and at present we utilize the One Step process for obtaining applicants.**

10. What is your greatest asset to assist you in managing this institution? **My administrative staff and support of my Division Director and Central Office. My staff, especially my administrative staff, assist me and the institution greatly.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

License #	Vehicle	Mileage	Assigned To	Condition_____
13-0298	2007 Dodge Grand Caravan	84,729	Pool	Fair
13-0377	2008 Chevy Uplander	48,601	Pool	Fair
13-0414	2010 Ford Econoline	19,718	Pool	Fair
13-0423	2007 Ford Crown Vic	138,419	Pool	Fair
13-0831	2008 Chevy Uplander	75,236	Pool	Fair
13-0833	2008 Chevy Uplander	70,856	Pool	Fair
13-0836	2007 Ford Crown Vic	134,153	Pool	Fair
13-0839	2007 Ford Crown Vic	136,573	Pool	Fair
13-0843	2001 Dodge Ram 2500	70,204	Maintenance	Fair
13-0844	2001 Dodge Ram 2500	73,739	Maintenance	Fair

13-0845	2001 Dodge Ram 2500	56,183 Maintenance	Fair
13-0847	2001 Ford F750	36,341 Maintenance	Fair
13-0848	2001 Ford F150	120,390 Maintenance	Fair
13-0850	2001 Ford F350	38,895 Maintenance	Fair
13-0853	2008 Ford Econoline Van	91,328 Pool	Fair
13-0854	2007 Ford Econoline Van	143,484 Pool	Fair
13-0855	2008 Ford Econoline Van	32,381 Pool	Fair
*13-0856	2006 Ford Econoline Van	161,943 Pool	Poor
13-0857	2008 Ford Econoline Van	92,092 Pool	Fair
13-0858	2008 Ford Econoline Van	95,906 Pool	Fair
13-0902	2008 Chevy Uplander	147,617 Pool	Fair
32-0265	2008 Chevy Uplander	149,190 Pool	Fair
32-0268	2008 Chevy Uplander	131,500 Pool	Fair
32-0270	2008 Chevy Upalander	105,700 Pool	Fair
32-0272	2008 Chevy Uplander	113,619 Pool	Fair
32-0286	2008 Chevy Uplander	126,286 Pool	Fair
32-0294	2008 Chevy Impala	96,488 Pool	Fair

\*Denotes vehicles that are in poor condition and/or have high mileage.

**12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer) The morale of staff is medium. Since the last time this question was asked there has been a new Warden appointed to SECC because of a lateral transfer of the previous Warden. Staff morale has improved due to operational changes the new Warden has implemented and stability of knowing that Warden Ian Wallace has no aspirations to transfer. Communications between the upper echelon and line staff is improving at this time and will continue to do so. Factors that have an influence on keeping the institutional staff morale from becoming high is staff being held accountable for their actions, mandated overtime, lack of pay increases and less benefits, communication issues, etc.**

**13. Caseworkers:**

- A. How many caseworkers are assigned to this institution? **18 case managers**
- B. Do you currently have any caseworker vacancies? **Yes -2**
- C. Do the caseworkers accumulate comp-time? **No**
- D. Do the caseworkers at this institution work alternative schedules? **No**
- E. How do inmates gain access to meet with caseworkers? **Open office hours are available for general population offenders 8:30 am – 10:30 am and 1:30 pm – 3:30 pm daily. Administrative segregation case managers meet with offenders daily through wing walks, call-outs and written requests by offenders.**
- E. Average caseload size per caseworker? **144**
  - # of disciplinary hearings per month? **14**
  - # of IRR's and grievances per month? **16**
  - # of transfers written per month? **2**
  - # of re-classification analysis (RCA's) per month? **7**
- F. Are there any services that you believe caseworkers should be providing, but are not providing? **No**

- G. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**
- H. What type of inmate programs/classes are the caseworkers at this institution involved in? **Pathways to Change, Anger Management, Puppies for Parole, Offenders Offering Alternatives, Impact of Crime on Victims Class, Restorative Justice**
- I. What other duties are assigned to caseworkers at this institution? **Case managers complete Transitional Accountability Plans on each offender assigned to their caseload. They process visiting applications, assist offenders in obtaining birth certificates/social security cards and official Department of Revenue identification cards in order to assist the offender upon his release. They also process room moves and assist the offender in any type of adjustment issues.**

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? **2**
- B. Do you currently have any staff shortages? **No**
- C. Do the parole officers accumulate comp-time? **No**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes, work schedules are flexed as necessary. One officer works core hours; the other works four (4), ten (10) hour days (Tuesday-Friday)**
- E. How do inmates gain access to meet with parole officers? **Via institutional mail/offender correspondence or in-person meetings with Institutional parole Officer.**
- F. Average caseload size per parole officer? **791**
  - # of pre-parole hearing reports per month? **11 per officer**
  - # of community placement reports per month? **5 per officer**
  - # of investigation requests per month? **8 per month**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **Officers facilitate separate "Pre-Release" orientation classes (usually quarterly) at the institution for general population and the minimum security offenders within 120 days of release.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **N/A**

16. Does your institution have saturation housing? **Yes** If so, how many beds? **16**

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? **378 operative/13 inoperative**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **We currently have three (3) working conditioners. Recharges are in need of new radio plates/platforms for charging.**



# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name: Tipton Correctional Center				
Custody Level	2 – Min.		Warden	Douglas J. Prudden
Total Acreage	160		Address	619 N. Osage Ave.
Acreage w/in Perimeter	40 acres			Tipton, MO 65081
Square Footage	320,000		Telephone:	660-433-2031 x 2222
Year Opened	1916 & 1996		Fax:	660-433-2613
Operational Capacity/Count (as of November 30, 2012)	1192 1150			
General Population Beds (capacity and count as of November 30, 2012)	1192 1150		Deputy Warden	Tim Burris, DWOM
Segregation Beds (capacity and count as of November 30, 2012)	96 83		Deputy Warden	Eileen Ramey, DWO
Treatment Beds (capacity and count as of November 30, 2012)	0		Asst. Warden	Cheryl Scherer
Work Cadre Beds (capacity and count as of November 30, 2012)	0		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	0		Major	John Shipman
Protective Custody Beds (capacity and count as of November 30, 2012)	0			

**1. Capital Improvement Needs:**

a. How would you rate the overall condition of the physical plant of the institution?

The overall condition of the physical plant remains good.

b. What capital improvement projects do you foresee at this facility over the next six years?

1. Upgrade fire alarm system.
2. Overlay perimeter road with 2" of asphalt.
3. Perimeter fence security system (Del Norte) needs to be replaced.
4. New roofing on buildings on the old side of the institution.
5. Install floor drainage system in segregation unit.
6. Replace HVAC in numerous housing units to be more modern and energy efficient.

c. How critical do you believe those projects are to the long-term sustainability of this facility?

These projects remain critical to the continued operation of the institution.

Fire alarm and fence security are critical to protect our staff, offenders and the public.

Roof and perimeter road continue to be repaired regularly.

HVAC system installed in 1996, no longer operating efficiently.

2. **Staffing:**

a. Do you have any critical staff shortages?

TCC occasionally has staff vacancies which are not filled quickly. The allocated staffing in certain sections is marginal at best and creates daily challenges in maintaining sufficient supervision, safety, and security. For example, the Food Service section has a total of twelve staff to plan, coordinate, and supervise over forty offender workers preparing nearly four thousand meals per day. The allocation of Corrections Officers assigned to the facility necessitates having only one officer per shift to supervise an entire housing unit of over one hundred offenders.

With such a minimal staffing allocation, employee absences due to sickness, training, vacations, and other reasons create shortages requiring staff to work overtime on a regular basis.

Consequently, supervisors must often deny requests for time off.

b. What is your average vacancy rate for all staff and for custody staff only?

Average vacancy rate for all staff is less than 1% and Custody staff is only 7.7%

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Greatly affects management – staff often feel overworked and cannot get time off due to staff call ins.

d. What is the process for assigning overtime to staff?

Seek volunteers first and then use rotating schedule for determining who will work overtime.

This is done by shift.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

When comp requests are paid it is reported as used time, so there is no accounting between used and paid off. The same is for mandatory comp payouts. 53.8% of Comp accrued is used, however this included used and paid out.

f. Is staff able to utilize accrued comp-time when they choose?

Not always – depends on staffing needs in that section at that time.

3. **Education Services:**

a. How many (and %) of inmate students at this institution are currently enrolled in school?

237 offenders enrolled in school. This is 60% of eligible students.

We have 1 teacher vacancy at this time.

b. How many (and %) of inmate students earn their GED each year in this institution?

Last year 207 students earned their GED. This is 30% of the students in our school.

TCC currently has an 86% pass rate of students taking their GED.

c. What are some of the problems faced by offenders who enroll in education programs?

Lack of self-confidence

Learning disabilities

Reading problems

4. **Substance Abuse Services:**

a. What substance abuse treatment or education programs does this institution have?

TCC has Alcoholics Anonymous, Narcotics Anonymous, and Celebrate Recovery. These are educational programs.

b. How many beds are allocated to those programs?

None

c. How many offender do those programs serve each year?

Approximately 150 to 200 offenders.

d. What percent of offenders successfully complete those programs?

These are ongoing programs with no completion dates.

c. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting?

N/A. TCC does not have a treatment program.

5. **Vocational Programs:**

a. What types of vocational education programs are offered at this institution?

Computer Servicing

b. How many offenders (and %) participate in these programs each year?

Approximately 60 per year complete the class. This is approximately 5% of the inmate population.

c. Do the programs lead to the award of a certificate?

Yes-letter of completion

d. Do you offer any training related to computer skills?

Yes-computer servicing

6. **Missouri Vocational Enterprises:**

a. What products are manufactured at this institution?

Flags, Office Chairs and a Reupholstering Service.

b. How many (and %) of offenders work for MVE at this site?

Total is approximately 50 offenders.

c. Who are the customers for those products?

Multiple State, County, Municipal Agencies and Non-Profit Organizations, as well as individual state employees.

d. What skills are the offenders gaining to help them when released back to the community?

Sewing and Upholstering Skills, along with numerous others (using hand tools, clerical, inventory control, production scheduling and warehouse duties, etc.)

7. **Medical Health Services:**

a. Is the facility accredited by the National Commission on Correctional Health Care? YES

b. How many offenders are seen in chronic care clinics? 711

7. **Medical Health Services (continued):**

c. What are some examples of common medical conditions seen in the medical unit?  
Cancer, diabetes, pain, skin conditions, hypertension, as well as vision and dental issues.

d. What are you doing to provide health education to offenders?

Yearly health fair, education by nursing staff during sick call or chronic care appointments, education by physician, dentist and eye doctor during appointments. We also target certain common health issues and post displays in display case outside of the medical department.

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? NO

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Yes, aging offenders often require care for chronic illnesses similar to the outside population. We have an increase in pain from arthritis or other degenerative bone and joint issues. We see an increase in dental needs and hepatitis due to years of the patient's neglecting their health care needs. More of our patients need eye care and many more of our population need assistance to ambulate using a cane or wheelchair. Along with the above medical complaints is the increased need for chronic medication, education and follow up care in the community after the offender is released.

8. **Mental Health Services:**

a. How do offenders go about obtaining mental health treatment services?

They may fill out an MSR (medical service request) and place it in the mental health box, they may come to medical on sick call with an MSR and medical will refer them to mental health. In the event of an emergency they may tell any staff member that they are having a mental health emergency and the staff member can contact mental health staff during business hours or the shift commander after hours.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There were no completed suicides at this institution in the past year.

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

There are no assigned offenders on psychotropic medications at this facility.

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

There are no assigned offenders with a chronic mental illness at this facility.

9. What is your greatest challenge in managing this institution?

The greatest challenge I have experienced so far in managing this facility is trying to maintain a safe, secure environment within the institution with a relatively small cadre of Corrections Officers. With such a limited security force, staff absences result in routinely holding staff beyond their shift to ensure adequate coverage of the most critical posts.

10. What is your greatest asset to assist you in managing this institution?  
I believe the greatest asset I have in managing the facility is the tremendous reservoir of experience possessed by the staff of Tipton Correctional Center. Most of the employees have been here for a number of years and are very competent in performing their duties. The overall morale of the staff is, in my opinion, slightly better here than at most facilities and may account for the lower staff turn over rate. Thus creating relatively high levels of experience among the staff.
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)  
TCC's fleet consist of 21 vehicles, 15 of which are assigned to offender transportation/perimeter patrol; 1 pool vehicle, and 5 specific function vehicles (maintenance). Of the 21 fleet vehicles, two have in excess of 100,000 miles and eight vehicles have in excess of 60,000 miles. Our newest fleet vehicles are model year 2008's. I have attached the most recent vehicle report which is current through the end of October. With the exception of the vehicle assigned to perimeter patrol (13-0443M), I am not aware of any vehicles experiencing mechanical problems that may be detrimental to their continued operation.
12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**  
Morale seems to be medium to high. Gainful employment during difficult economic times, ability to take time off, and recent cost of living pay increase are significant factors.
13. **Case Managers:**
- A. How many case managers are assigned to this institution?  
We currently have 15 Corrections Case Manager II's, 3 Corrections Case Manager I's and 2 CCA's with one of the CCM II's assigned to the Grievance Office.
- B. Do you currently have any case manager vacancies? YES
- C. Do the case managers accumulate comp-time? NO
- D. Do the case managers at this institution work alternative schedules? YES  
Case manager staff flex their schedule to accommodate conducting groups and availability for work release.
- E. How do inmates gain access to meet with caseworkers?  
We have an open door policy. Offenders may also place a written request to schedule a meeting with case management staff.
- F. Average caseload size per case manager? 100
- # of disciplinary hearings per month? 32
  - # of IRR's and grievances per month?
- Each Housing Unit processes approximately 11 IRR's per month and the institution processes approximately 42 grievances/appeals per month.
- # of transfers written per month? 12
  - # of re-classification analysis (RCA's) per month? 35

13. **Case Managers (continued):**

G. Are there any services that you believe caseworkers should be providing, but are not providing?

No. The casework staff at Tipton Correctional Center work diligently every day to provide a multitude of programs and services to the offender population. The programming covers a wide range of subjects from anger management to cognitive restructuring to better parenting. In my view, the Classification (casework staff) provide more than enough opportunities and tools for an offender to make significant, positive changes in their lives and lifestyles.

H. If so, what are the barriers that prevent caseworkers from delivering these services? N/A

I. What type of inmate programs/classes are the caseworkers at this institution involved in? Classification staff facilitate Impact of Crime on Victims Class, Pathways to Change, Inside/Out Dads, Anger Management, and attend Local MRP Steering Committees. Classification staff also assembles the work release crews and establishes community service project crews. One of two Restorative Justice projects is an in-house project of coloring books which involves issuing and tracking materials by the Classification staff.

J. What other duties are assigned to case managers at this institution?

We have one CCM II that oversees our work release program which includes site visits to ensure compliance, processing of files for review, training work crew supervisors, and setting up community project crews. We also have a CCA assigned to coordinate all bed moves within the institution and a CCA that coordinates all job assignments as well as data entry work for program tracking. That person assigns and then records when offenders complete a program. We have one CCM II that is assigned as a Grievance Officer, who prepares responses on offender grievances for the Warden as well as processes Grievance appeals. In addition, a training program for rescued dogs has begun, in which offenders provide obedience training to dogs from a local shelter.

14. **Institutional Probation and Parole Officers:**

A. How many parole officers are assigned to this institution? 4-POII's

B. Do you currently have any staff shortages? NO

C. Do the parole officers accumulate comp-time? NO

D. Do the parole officers at this institution flex their time, work alternative schedules? YES

E. How do inmates gain access to meet with parole officers?

Open door (open office hours), letter to P.O.

F. Average caseload size per parole officer? 250

• # of pre-parole hearing reports per month? 15 per officer=60

• # of community placement reports per month? 3 per officer= 9 mo

• # of investigation requests per month? 80

G. Are there any services that you believe parole officers should be providing, but are not providing? NO

14. **Institutional Probation and Parole Officers (continued):**  
H. If so, what are the barriers that prevent officers from delivering these services? N/A  
  
I. What type of inmate programs/classes are the parole officers at this institution involved in?  
PO facilitates Cycle of Change Program-150 hours consisting of: Beyond Anger, Criminal Thinking, Roots of Violence and Relationships.
15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. None
16. Does your institution have saturation housing? If so, how many beds? YES  
There are 104 saturation beds dispersed throughout the housing units.
17. **Radio/Battery Needs:**  
a. What is the number of radios in working condition? - New Radios 285  
b. Do you have an adequate supply of batteries with a good life expectancy? YES  
c. Are the conditioners/rechargers in good working order? YES

# **Joint Committee on Corrections**

## **Information for Legislative Institutional Visits**

Facility Name:	<b>Western Missouri Correctional Center – December 2012</b>			
Custody Level	C-4		Warden	Ronda J. Pash
Total Acreage	385		Address	609 East Pence Road Cameron MO 64429
Acreage w/in Perimeter	54			
Square Footage	96 (cell)		Telephone:	816 632-1390
Year Opened	1988		Fax:	816 632-2562
Operational Capacity/Count (as of November 30, 2012)	1958 / 1950			
General Population Beds (capacity and count as of November 30, 2012)	1758 / 1645		Deputy Warden	Lori Lakey, Operations
Segregation Beds (capacity and count as of November 30, 2012)	198 / 163		Deputy Warden	Krista Helton, Offender Management (effective 12/2/2012)
Treatment Beds (capacity and count as of November 30, 2012)	N/A		Asst. Warden	Todd Warren
Work Cadre Beds (capacity and count as of November 30, 2012)	200 / 30		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)	N/A		Major	CS II Marvin Gregg
Protective Custody Beds (capacity and count as of November 30, 2012)	N/A			

### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution? Average for the age of the institution.
- b. What capital improvement projects do you foresee at this facility over the next six years?  
Perimeter Fence Alarms; Heating System upgrade; Resurfacing perimeter roads and parking lots; Housing Unit Cell Windows; High Mast Lighting; Administration Building sky lights; Administration Building Chiller; Domestic hot and cold water isolation valve replacement; Energy Efficient windows throughout; Repair and/or replace sidewalks.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
Perimeter Fence Alarm System – 1

Housing Units 1, 2, and 3 need heating system updated. They were too small when the institution opened. Have always had trouble heating the back offices and control modules. They require electric heaters in both areas to make it tolerable for staff to work. With the energy cuts, electric heaters are not desirable. Staff members complain daily in cold weather.



Resurfacing Perimeter Roads and Parking Lots – The parking lots are in terrible shape; they may need to be completely resurfaced – 1

Housing Unit Cell Windows – They leak air so bad we have been putting plastic over the inside of the windows in the winter for the last 10 years. They are rusted out and need replaced – 2

High Mast Lighting on Perimeter Fence / Energy Efficient – 4

Administration Building Skylight – needs repairs or removed – 4

Administration Building Chiller – 3

Domestic hot and domestic cold water isolation valves – need replaced in Housing Units 2 – 10. Officers have no way to shut water off if needed – 5

Energy Efficient Windows throughout – 5

Repair and/or replace Sidewalks – 6

**2. Staffing:**

- a. Do you have any critical staff shortages? Cooks at times.
- b. What is your average vacancy rate for all staff and for custody staff only? 1.5 and 1.5
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? Yes, during Holidays. Supervisors work with employees to schedule this time off.
- d. What is the process for assigning overtime to staff? We have both a voluntary and mandatory overtime procedure in place.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? 23% time off; 77% paid
- f. Is staff able to utilize accrued comp-time when they choose? Yes

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school? Approximately 490 offenders enrolled; which is approximately 35% of the population
- b. How many (and %) of inmate students earn their GED each year in this institution? Approximately 3.9% of the population received their GED last year (77 offenders)
- c. What are some of the problems faced by offenders who enroll in education programs? One problem is access to current materials. The process to get to take the GED test takes time. There are specific guidelines that the Education Department must meet before students get to test.

**4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have? N/A
- b. How many beds are allocated to those programs?
- c. How many offenders do those programs serve each year?
- d. What percent of offenders successfully complete those programs?
- e. What, in you opinion, is the biggest challenge to running a treatment program in a prison setting?

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? WMCC has nine vocational education classes. Eight are in the area of Industrial Trades and one is computer skills. They are: Auto Mechanics, Diesel Mechanics, Small Engine Mechanics, Residential Carpentry, Modern Woodworking, Residential Plumbing, Residential Electrical Wiring, Basic Welding, and Applied Computer Technology.
- b. How many offenders (and %) participate in these programs each year? During FY11, 410 male offenders participated in vocational classes. This number is approximately 25% of the institution's population.
- c. Do the programs lead to the award of a certificate? Two certificates are awarded to each offender who completes a class. A DOC completion certificate is given to each man. It includes information on the topics studied and an evaluation ranking for each topic. The classes are registered with the apprenticeship program under the U. S. Department of labor. All offenders who complete one of those classes also received an apprenticeship certificate.
- d. Do you offer any training related to computer skills? A class in computer skills is offered. The curriculum includes basic typing skills, and the study of Windows, Excel and Access plus a unit on basic care and maintenance of a computer.

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution? N/A
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care? Yes. Re-accreditation was granted November 2008 and again with our survey November 2011.
- b. How many offenders are seen in chronic care clinics? There are approximately 1300 patients currently enrolled in the Chronic Care Clinics and Infection Control Clinics. This is an increase of 51 patients from last year. Their care with scheduling of appointments along with laboratory test is guided by protocols for each clinics.
- c. What are some examples of common medical conditions seen in the medical unit?  
Western Missouri Correctional Center is a level 5 Medical facility, many patients are transferred to WMCC to accommodate their health care needs. The facility is extremely accommodating to patients with debilitating diseases because of the handicap accessibility and the flat landscape. The Medical unit sees a wide variety of health issues from acute to chronic health problems. WMCC Medical Department is one of three facilities in the State of Missouri considered a "Center of Excellence" for their management of Hepatitis C. The top four diseases managed in the Chronic Care Clinics are Cardiovascular, Pulmonary/Asthma, Hepatitis C and Diabetes. Our Emergency Department is staffed and equipped to manage care ranging from Cardiac events, trauma, exacerbation of disease process and seizures. Weekly Health Care Management Meetings by the Physicians coordinates care of the disease process of the patients. With the installation of the Telemed equipment it has improved the time and cost of sending patients out to specialist for consults.
- d. What are you doing to provide health education to offenders?  
Our Mission has been to correctly inform the patients regarding current health status, treatment modalities, and disease prevention. The Medical Unit contains current literature on site for offenders' access. We provide an annual Health Fair for the offenders to attend, obtain

pamphlets and have minor routine examinations performed. The Medical Department also supplies the educational films to be viewed over the institutional TV system. We have mailings and internet accessibility to provide the most current health care information available. By providing patients with health education, we are empowering these adults to take a proactive role in their health care.

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? We have not had any active Tuberculosis cases within this past year. We do have protocols in place if the situation arises.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? Yes. If yes, please explain  
We are for offenders ranging from 90 to 19 years of age, as our population ages as a whole, the acuity of the medical conditions rises. We are treating medical conditions often limited to long term care facilities such as Dementia and Alzheimer's. These issues present various health and safety risks for patients within the correctional environment. As people age they are less likely to be able to perform all of their activities of daily living. We have a significant population that requires mobility devices such as wheelchairs, canes, braces and walkers. With the increase of Hepatitis C in the communities and institutions, we are taking care of a lot more patients during their last stages of life providing supportive care to them and their families.

#### 8. **Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services? Offenders are able to obtain mental health services through the MSR process. Referrals by staff are also scheduled for an initial evaluation.
  - b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? None
  - c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? About 13% of the population are prescribed psychotropic medications.
  - d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? There are currently 236 offenders in Chronic Care. Mental health provides psychotropic medication, psychiatric appointments at least once every three months, chronic care appointments/counseling at least once a month with QMHP, mental health groups, and referral to special units as needed.
9. What is your greatest challenge in managing this institution? WMCC, as with the other institutions, has been asked to maintain operations with fewer resources. As the physical plant ages, repairs and upkeep become more demanding. This period of economic strain has required the administrative team and staff to "think outside the box" to provide services and remain within budgetary limits.
10. What is your greatest asset to assist you in managing this institution? Staff are the greatest asset in managing this institution.
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) Report attached.
12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**  
I would consider the morale of the custody staff at Western Missouri Correctional Center at medium. Currently we are down eleven CO I positions but have ten candidates for new hire. We are also down

four Sergeant positions – two are due to medical conditions. We still have several staff with FMLA certification and/or unscheduled leave issues. I believe these time and attendance issues are what contributes to some of our staffing issues, which results in volunteer or mandatory overtime.

### 13. Caseworkers:

- A. How many caseworkers are assigned to this institution? 23 Case Managers, 3 CCA's
- B. Do you currently have any caseworker vacancies? No
- C. Do the caseworkers accumulate comp-time? No
- D. Do the caseworkers at this institution work alternative schedules? No
- E. How do inmates gain access to meet with caseworkers? Open door policy
- E. Average caseload size per caseworker? 100
  - # of disciplinary hearings per month?
  - # of IRR's and grievances per month?
  - # of transfers written per month?
  - # of re-classification analysis (RCA's) per month?

	August	September	October
Conduct Violations	470	464	564
IRR's and Grievances	232	257	266
RCA's	366	416	347
Transfers	77	75	79

- F. Are there any services that you believe caseworkers should be providing, but are not providing?  
Due to heavy workload, staff cannot offer re-entry services to the extent we would like to.
- G. If so, what are the barriers that prevent caseworkers from delivering these services? Workload and large caseload size.
- H. What type of inmate programs/classes are the caseworkers at this institution involved in?

Inside-Out Dads: This class teaches parenting and communication skills necessary to be a good parent. It teaches offenders how to deal with children and the trust issues that may arise between them. Inside-Out Dads teaches to be firm and back what you say. The class meets once a week for 12 weeks.

Therapeutic Community: This is a voluntary self-help program where offenders must show a true desire to want to make changes. They are able to address just about any issue while they are in the program such as substance abuse, relationships, employment, etc.

Impact of Crime on Victims: This class provides participants with insight as to how crimes directly or indirectly impact families and communities. Guest speakers are invited to speak about how crime has impacted their lives. This class meets once a week for 10 weeks.

Pathways to Change: This is a Cognitive Skills class full of activities designed to assist participants to recognize their decision making habits through exploring perceptions and intuition in an alternative learning environment. Pathways to change helps participants learn more about themselves and why they react to certain situations the way they do. This class meets once a week for 12 weeks.

- I. What other duties are assigned to caseworkers at this institution? Case Managers assist with the processing of visiting applications, job changes and room moves when necessary. They conduct disciplinary hearings, investigate and complete Informal Resolution Requests and complete transfer requests. Case Manager staff assist with wing tours and institutional counts. The Case Managers are actively involved in the Missouri Reentry process by completing Transitional Accountability Plans. This includes case management, assisting the offender in the development of a plan for successful release, and providing community contacts.

**14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? 6 PO II's and 1 PO III
- B. Do you currently have any staff shortages? No
- C. Do the parole officers accumulate comp-time? No
- D. Do the parole officers at this institution flex their time, work alternative schedules? Several officers work four 10-hour days
- E. How do inmates gain access to meet with parole officers? All parole officers have open door for two hours weekly, and they also see offenders by appointment.
- F. Average caseload size per parole officer? 280
  - # of pre-parole hearing reports per month? 55
  - # of community placement reports per month? 25
  - # of investigation requests per month? 60
- G. Are there any services that you believe parole officers should be providing, but are not providing? No
- H. If so, what are the barriers that prevent officers from delivering these services? N/A
- I. What type of inmate programs/classes are the parole officers at this institution involved in? Pre-release group.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

16. Does your institution have saturation housing? If so, how many beds? No.

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition? We have 290 new radios. On Sunday, November 4, 2012, Western Missouri Correctional Center placed their new radio system into operation. We received 290 new hand held radios and 580 new radio batteries.

We issued two 6-pack battery chargers and 3 individual quick chargers to the Maintenance Department. One 6-pack charger is in A-Side Sergeant's Office. One 6-pack charger is in B-Side Sergeant's Office. Four 6-pack chargers and 2 analyzers are in Control Center. Two individual quick chargers are maintained in the Shift Commanders Office. Two individual quick chargers are in the Food Service office area.

- b. Do you have an adequate supply of batteries with a good life expectancy? Yes.
- c. Are the conditioners/rechargers in good working order? Yes.



## **Joint Committee on Corrections**

### **Information for Legislative Institutional Visits**

Facility Name: Western Reception Diagnostic & Correctional Center (WRDCC)			
Custody Level	C 1-5	Warden	Ryan Crews
Total Acreage	158 (Approx.)	Address	3401 Faraon St.
Acreage w/in Perimeter	71 (Approx.)		St. Joseph, MO 64506
Square Footage	All Buildings – 720,000	Telephone:	816-387-2158
Year Opened	1999	Fax:	816-387-2217
Operational Capacity/Count (as of November 30, 2012)	1980/2113		
General Population Beds (capacity and count as of November 30, 2012)	752*/646 *includes 12 juvenile beds	Deputy Warden	Heath Spackler
Segregation Beds (capacity and count as of November 30, 2012)	136*/82 *includes 49 TASC beds	Deputy Warden	Vacant
Treatment Beds (capacity and count as of November 30, 2012)	645/625	Asst. Warden	Nancy Alldredge
Work Cadre Beds (capacity and count as of November 30, 2012)	None	Asst. Warden	Richard Stepanek
Diagnostic Beds (capacity and count as of November 30, 2012)	496/760	Major	Thaniel McFee
Protective Custody Beds (capacity and count as of November 30, 2012)	None		

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?  
*Good.*
- b. What capital improvement projects do you foresee at this facility over the next six years?
  - 1. Security System (Blackcreek) and perimeter fence upgrade - funded, but not started.*
  - 2. Remove/demolition of Progress Hall.*
  - 3. New Multi-Purpose Building.*
  - 4. Training Building upgrade on roof/plumbing/electrical/classrooms/HVAC.*
  - 5. Re-roofing the laundry building and powerhouse.*
  - 6. Renovation of Housing Unit #10, J-wing.*
  - 7. Upgrade electrical system in Housing Unit #11.*
  - 8. Re-roof/upgrade HVAC, electrical and plumbing in Offender Property Building.*
  - 9. Repair fire detection system in Housing Unit #1.*
  - 10. Upgrade drainage on Housing Unit #1 recreation yard.*
- c. How critical do you believe those projects are to the long-term sustainability of this facility?

***Very critical.***

**2. Staffing:**

- a. Do you have any critical staff shortages?  
***Vacancies: 5 – Corrections Officer I's; 1 – Corrections Manager; 1 – Corrections Officer II's***
  - ***Correction Officers, clerical staff, and Cooks positions are always hard to fill because very few applicants are on the register. In my opinion due to staffing levels, each vacancy would be critical.***
- b. What is your average vacancy rate for all staff and for custody staff only?  
***There is an average vacancy rate for all staff of 15.38% and 14.40% for custody staff.***
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
***Yes, the accrual/usage of compensatory time presents a daily challenge to custody supervisors to minimize accrual and to ensure compensatory time reduction occurs in a manner which ensures adequate daily staffing while accommodating staff requests for leave.***
- d. What is the process for assigning overtime to staff?  
***The vast majority of overtime accrued is the result of holidays. The earned overtime is primarily accrued in areas such as transportation runs. All other overtime accrued by staff is assigned first by requesting volunteers and then by assignment based on seniority if no volunteers are found.***
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?  
***For Corrections Officer I and II staff, approximately 42% of the comp-time accrued is paid off and the remaining 58% is retained or used. Other staff do not receive comp time payouts and must use it as time off.***
- f. Is staff able to utilize accrued comp-time when they choose?  
***Every effort is made to accommodate staff requests. In most cases, staff utilize accrued compensatory time on dates of their choice based on the needs of the facility.***

**3. Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
  - ***Education for General Population has 60 students which accounts for approximately 8% of the of general population offenders.***
  - ***In our treatment program, we had about 170 offenders participating in GED classes on a part time basis which accounts for 28.6 % of treatment offenders.***
- b. How many (and %) of inmate students earn their GED each year in this institution?  
***So far in 2012 there have been 110 successful GED completions in treatment. General population education just recently started and have not had any offenders take the GED test yet.***
- c. What are some of the problems faced by offenders who enroll in education programs?  
***Some of the issues offenders may experience which makes education a challenge includes:***



- *Inability to complete the program due to the brevity of term at WRTC*
- *Conflict with other required programs*
- *Entry level academic skills*
- *Low self esteem related to educational history*
- *Family and social stressors*
- *Mental disorders*
- *Medical conditions*

4. **Substance Abuse Services:**

- What substance abuse treatment or education programs does this institution have?  
*WRDCC has treatment programs run Division of Offender Services and Gateway, a contract provider. The following programs are offered.*
  - *180-OUT, Offenders Under Treatment, 6 Month Program*
  - *BSAP, Board Ordered 6 Month Program*
  - *120-Day Treatment, Court and Board Ordered*
  - *Post Conviction Treatment*
  - *84 Day Parole Violator Treatment*
  - *120-Day Court Ordered Detention Sanction Program (CODS)*
  - *Partial Day Treatment Program*
- How many beds are allocated to those programs?
  - *BSAP, Board Ordered 6 Month Program (Gateway) - 135*
  - *180-OUT, Offenders Under Treatment, 6 Month Program (DORS) – 45*
  - *120-Day Treatment (Gateway) – 140*
  - *120 Day/Post Conviction/Parole Violator/CODS (DORS)-275*
  - *Partial Day Treatment Program (Gateway) - 50*
- How many offenders do those programs serve each year?
  - *BSAP, Board Ordered 6 mo. Program (Gateway) – 419 (July 2011 to July 2012)*
  - *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 540*
  - *120-Day Treatment (DORS)-1917*
  - *120-Day Treatment (Gateway) – 693 (July 2011 to July 2012)*
  - *Intermediate Treatment Program (Gateway) – 419 (July 2011 to July 2012)*
  - *Post Conviction Treatment (DORS)-244*
  - *84 Day Parole Violator – 903*
  - *CODS – 0 – program (just started)*
- What percent of offenders successfully complete those programs?
  - *BSAP, Board Ordered 6 mo. Program (Gateway) - 90%*
  - *120-Day Treatment (Gateway) - 88%*
  - *120-Day Treatment (DORS) – 98%*
  - *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 95%*
  - *Intermediate Treatment Program (Gateway) - 90%*
  - *Post Conviction Treatment (DORS) – 97%*
  - *84 Day Parole Violator – 95%*
  - *CODS – 0%*

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

*Establishing a level of trust to deal with issues of the clients' former lifestyles. Breaking through the denial of the seriousness of a client's substance abuse/dependency and criminal lifestyle is a task. Management of the MH-3 / MH-4 clients and dual diagnosed offenders. It is also difficult to work with some of the offenders with numerous medical restrictions and lay-ins due to their limitations. We make every effort to work with these offenders to the best of our ability; however, many times it is difficult to get them all of the services they really need while they are in the prison setting. The biggest challenge at this time is receiving a higher number of disruptive and challenging offenders than in the previous years. We appear to be getting higher custody level offenders with a more violent past. Also, consistency among staff is also a huge challenge. It is often difficult to get all of the staff on the same page and keeping it continually consistent due to constant changes.*

**5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?

*WRDCC does not have any vocational programming*

- b. How many offenders (and %) participate in these programs each year?

*N/A*

- c. Do the programs lead to the award of a certificate?

*N/A*

- d. Do you offer any training related to computer skills?

*No*

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?

*None*

- b. How many (and %) of offenders work for MVE at this site?

*None*

- c. Who are the customers for those products?

*N/A*

- d. What skills are the offenders gaining to help them when released back to the community?

*N/A*

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?

*Yes*

- b. How many offenders are seen in chronic care clinics?

*Approximately 300 a month are for routine chronic care visits by either nursing or physician.*

- c. What are some examples of common medical conditions seen in the medical unit?

*Back pain, athlete's foot, sinus congestion, sports injuries, heartburn.*

- d. What are you doing to provide health education to offenders?  
*Annual health fair, education during nursing and provider appointments, pamphlets available in medical waiting rooms, occasional use of offender information channel (TV).*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?  
*No active cases of TB have been identified in the facility.*
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.  
*Yes, however most aged offenders have a higher medical score than can be accommodated at WRDCC, so we have not seen a significant effect in population.*

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?  
*Upon arrival at WRDCC R&D unit, every offender responds to questions on an Intake Mental Health Screening form completed by a medical nurse. Offenders arriving with verified psychotropic medication have an immediate face-to-face evaluation with a Qualified Mental Health Professional (QMHP). A QMHP is a Missouri Licensed Psychologist, Counselor, or Social Worker. There is a suicide risk potential that also provides an immediate face-to-face evaluation.*

*In the medical screening room, there is a large copy of a Medical Service Request (MSR). During the Mental Health Intake, offenders are again educated on how to request mental health services. The Mental Health Intake is a structured clinical interview that determines Mental Health Level and need of services. The Mental Health Intake is conducted between day 5 and 14 of the Diagnostic process.*

*The Referral and Screening Note (RSN) may be completed and submitted by any staff member, which again results in an individual encounter with a QMHP. All QMHP's have a caseload of offenders with a Mental Health - 3 Score and also to handle emergency services, as needed in their assigned housing units. In the evenings and on weekends and holidays, QMHP's rotate on-call to ensure 24 hour coverage for all offenders.*

*Staff in various housing units refer offenders to a variety of Mental Health groups ranging from Adjustment to Incarceration, Anger Management and Trauma Groups.*

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?  
*There have been no completed suicides since WRDCC opened in 1999. There is close communication between DOC staff and Mental Health, with a very proactive approach regarding intervention. All WRDCC staff attend annual training which includes a section for suicide prevention. Suicide Prevention training includes information and education including risk factors.*

*WRDCC has 9 single-man camera cells which are monitored by custody checks not less than 4 times an hour. Mental Health also has access to 2 additional camera cells in the TCU. QMHP's have daily contact with the offender to evaluate the level of risk and*

*supervision needed with custody providing timely and relevant information by documentation in the chronology file, as well as informing mental health of their observations to assist in modifications for the offenders on suicide watch.*

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

**399 (19.31%)**

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

*Those (MH 4) offenders in the diagnostic center are seen weekly to monitor stability/symptoms of mental illness. They are also referred, as criteria applies, to the Social Rehabilitation Unit (SRU) at FCC, The Special Needs Unit (SNU) at PCC . This year at JCCC we gained a Secure Social Rehabilitation Unit (SSRU) .*

*Offenders who are at risk in general population due to mental illness can be placed on Close Observation pending transfer or assimilation to general population with symptom management.*

*Offenders with acute psychiatric symptoms that meet criteria as an imminent risk of harm to self and/or others and other criteria may be referred by the psychiatrist for a Due Process and Involuntary Medication Hearing. This has occurred 4 times this year due to the more chronic and severely mentally ill population we receive.*

*All offenders with a Mental Health diagnosis participate in the creation of an Individual Treatment Plan to identify problems and goals. These offenders are placed in Mental Health Chronic Care, 406 at this time. These offenders meet with a QMHP at least once a month and sooner if needed. They have regular appointments with a staff psychiatrist and a psychiatric nurse.*

*WRDCC, due to being a diagnostic center, has also been chosen to participate in a new sentencing statute for several mentally ill offenders with a 120 Mental Health Treatment Program in conjunction with Department of Mental Health, Jackson County and Probation and Parole.*

9. What is your greatest challenge in managing this institution?

*The most challenging part is the overall management of the facility's workforce and the aging physical condition of some of the facility's buildings. Given the budgetary constraints and staffing reductions it is increasingly challenging to ensure appropriate maintenance of infrastructure and necessary staffing for adequate monitoring of all institutional functions. This can have an impact on staffs' working conditions and overall morale.*

10. What is your greatest asset to assist you in managing this institution?

*As always, the staff are the greatest asset to ensure the successful operation of our facility, followed by the support provided by the Division's executive staff. The facility's Administrative staff, section heads, and shift commanders continue to make it possible to manage the institution in a safe and effective manner.*

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

*Fleet Vehicles**Mileage as of 10/30/12*

<u>8 Crown Vic.</u>	<u>Mileage</u>	<u>Year</u>	<u>Status</u>
13-0010	81,478	2007	Inmate Transport
13-0025	61,258	2007	Inmate Transport
13-0332	65,881	2007	Inmate Transport
13-0352	136,839	2003	Perimeter Vehicle
13-0396	74,752	2006	Inmate Transport
13-0705	118,329	2004	Perimeter Vehicle
13-0724	75,340	1998	Specialty Squad
13-0792	56,389	2008	Inmate Transport
 <u>5 Max Vans</u>			
13-0268	109,040	2006	Inmate Transport Security Cage
13-0278	150,334	2007	Inmate Transport
13-0346	151,720	1997	Inmate Transport Handicap
13-0394	130,339	2006	Inmate Transport
13-0730	58,535	1998	Specialty squad
 <u>1 Bus</u>			
13-0372	129,255	2010	Inmate Transport
 <u>3 Mini Vans</u>			
13-0675	114,026	2008	Inmate Transport
13-0677	108,174	2008	Inmate Transport
32-0259	125,329	2008	Inmate Transport
 <u>4 Impalas</u>			
32-0233	86,207	2008	Pool
32-0239	87,469	2008	Pool
32-0242	82,382	2008	Pool
32-0246	85,031	2008	Pool
 <u>1 Suburban</u>			
13-0707	43,933	1999	Specialty Squad

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

*Staff morale would be rated as medium; due in part to the reduction in staff over the last several years and lack of cost of living raises. They have also been required to do more because of less staff. Most take pride in what they do and continue to perform their duties in a professional manner. Each has an opinion as to the problems within the department from health care benefits to the working conditions of being constantly short staffed, with that they continue to perform all assigned duties and bring credit to themselves and this institution.*

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

- *Housing Unit #1(Treatment) - 4 Corrections Case Managers , 1 Corrections Classification Assistant*

- *Housing Unit #6 (Transitional Housing Unit and Work Release) - 6 Corrections Case Managers, 1 Corrections Classification Assistant, 1 Institutional Activity Coordinator*
- *Housing Unit #10 (Diagnostic Center) - 1- Corrections Case Manager III , 7- Corrections Case Managers*
- *Housing Unit #10 (Administrative Segregation) - 3- Corrections Case Managers*
- *Housing Unit #11 (General Population) - 6 – Corrections Case Managers, 1 - Corrections Classification Assistant*
- *Grievance Office - 1 Corrections Case Manager*

B. Do you currently have any caseworker vacancies?

*No*

C. Do the caseworkers accumulate comp-time?

*Yes, but we encourage the use of flex scheduling to avoid accumulation of any overtime.*

D. Do the caseworkers at this institution work alternative schedules?

*No.*

E. How do inmates gain access to meet with caseworkers?

*Through an open-door policy, by submitting written request, or by being placed on a call-out list.*

F. Average caseload size per caseworker?

*73 Offenders to 1 Caseworker*

- # of disciplinary hearings per month?
  - *Housing Unit #1 – 136.7 monthly average*
  - *Housing Unit #6 – 101.9 monthly average*
  - *Housing Unit #10 – 145.5 monthly average*
  - *Housing Unit #11 – 150.2 monthly average*
- # of IRR's and grievances per month?
  - *Housing Unit #10 – 47.3 monthly average*
  - *Housing Unit #1 – 9.4 monthly average*
  - *Housing Unit #6 – 19.8 monthly average*
  - *Housing Unit #11 – 41.7 monthly average*
  - *Grievances (entire facility) – 36.9 monthly average*
  - *1,216 Total IRRs for 2012*
  - *432 Total Grievances for 2012*
- # of transfers written per month?
  - *Housing Unit #1 – 11 monthly average*
  - *Housing Unit #6 – 16.1 monthly average*
  - *Housing Unit #11 – 27.7 monthly average*
  - *Housing Unit #10 - averages 1.6 (Transfers do not include those offenders sent out of the Diagnostic Center to other facilities; only transfers written and submitted to Central Transfer Authority.)*

- # of re-classification analysis (RCA's) per month?
  - **Housing Unit #1 –36.7 monthly average**
  - **Housing Unit #6 – 57.7 monthly average**
  - **Housing Unit #11 –36.2 monthly average**
  - **Housing Unit #10 - 173.9 RCA's/ICA's monthly average (This includes diagnostic offenders)**

G. Are there any services that you believe caseworkers should be providing, but are not providing?  
**No**

H. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**

I. What type of inmate programs/classes are the caseworkers at this institution involved in?  
**Pathways to Change, Impact of Crime on Victims Class, Inside Out Dads, Anger Management.**

J. What other duties are assigned to caseworkers at this institution?  
**Notary services, classification file reviews, AICS (Adult Internal Classification System), process all visiting forms, process death and critical illness notices, make all housing and job assignments, case management team member, RCA (Reclassification Analysis), TAP (Transitional Accountability Plans), contacting outside agencies for referral services, possible enemy/protective custody investigations, order supplies and maintain inventory for housing units, back-up for custody staff, searches and counts, attend mandatory meetings (Medical, Fire/Safety), provide daily counseling to offenders, diagnostic processing and fill in as acting Functional Unit Manager when needed. Required to obtain 40 hours of training per year.**

#### **14. Institutional Probation and Parole officers:**

A. How many parole officers are assigned to this institution?  
**13 POII's, 1 POIII**

B. Do you currently have any staff shortages?  
**Waiting to fill one position which should occur soon.**

C. Do the parole officers accumulate comp-time?  
**On rare occasions**

D. Do the parole officers at this institution flex their time, work alternative schedules?  
**Yes**

E. How do inmates gain access to meet with parole officers?  
**Open door, callouts, and written correspondence**

F. Average caseload size per parole officer? **140**

- # of pre-parole hearing reports per month? **90**
- # of community placement reports per month? **30-40**
- # of investigation requests per month? **190-210**

G. Are there any services that you believe parole officers should be providing, but are not providing?  
**No**

H. If so, what are the barriers that prevent officers from delivering these services?

*N/A*

I. What type of inmate programs/classes are the parole officers at this institution involved in?

*Two officers are trained for Pathways to Change and two are trained for Anger Management.*

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

*I would mention that the last few years have been difficult for corrections, as I am sure it has been for many other agencies. Staffing reductions have impacted workload and budget cuts have made it difficult to replace aging equipment, all of which impacts working conditions and morale. Salaries and benefits are also big concerns for staff. The price of consumer products and durable goods has gone up; however, there has only been one modest cost of living increase in the last few years. Changes to benefit plans over the last several years have also increased out of pocket expenses, adding to the financial challenges staff are experiencing. An increasingly higher number of staff are faced with the decision to change their standard of living or find part time employment. Many have left State service for higher paying positions in order to support their families. This results in staffing shortages which can be difficult to overcome due to the aforementioned reduced staffing. All of this compounds the struggles we face with the recruitment and retention of skilled staff in a variety of job classifications.*

16. Does your institution have saturation housing? If so, how many beds?

*Housing Unit #10 has 286 saturation/temporary beds.*

17. **Radio/Battery Needs:**

a. What is the number of radios in working condition?

- *Kenwood 3180*
- *400 serviceable*
- *5 conditioner serviceable*
- *400 single chargers serviceable*
- *200 battery supply*

b. Do you have an adequate supply of batteries with a good life expectancy? *Yes*

c. Are the conditioners/rechargers in good working order? *Yes*



# **Joint Committee on Corrections**

## **2012**

### **Information for Legislative Institutional Visits**

Facility Name: Women's Eastern Reception, Diagnostic and Correctional Center				
Custody Level	C-1 to C-5 female		Warden	Angela Mesmer
Total Acreage	117		Address	1101 East Highway 54 Vandalia, Mo. 63382
Acreage w/in Perimeter	47			
Square Footage	420,231		Telephone:	(573) 594-6686
Year Opened	1997		Fax:	(573) 594-6789
Operational Capacity/Count (as of November 30, 2012)	1,460 / 1,636			
General Population Beds (capacity and count as of November 30, 2012)	1,532 / 1,175		Deputy Warden	Cybelle Webber (Operations)
Segregation Beds (capacity and count as of November 30, 2012)	48 / 25		Deputy Warden	Tom Dunn (Offender Management)
Treatment Beds (capacity and count as of November 30, 2012)	330 / 236		Asst. Warden	Deborah Miller
Work Cadre Beds (capacity count as of November 30, 2012)	54 / 33		Asst. Warden	N/A
Diagnostic Beds (capacity and count as of November 30, 2012)	200 / 184		Major	John Gibbs
Protective Custody Beds (capacity and count as of November 30, 2012)	0 / 0			

#### **1. Capital Improvement Needs:**

- a. How would you rate the overall condition of the physical plant of the institution?  
*I would rate the overall condition of the physical plant as very good. Due to newer technology there will be a need for some energy efficient upgrades. This past year the following energy efficient upgrades have either been made or are in the process.*
  - Replacement of all metal halide lamps throughout the institution (222) with fluorescent fixtures. Re-lamping all fluorescent fixtures with energy saving ballasts and 28 watt T-8 fluorescent lamps (funded by FMDC E&E budget).
  - Upgrade of building automated system, installation of new motors and controls to HVAC system. This will enhance efficient operations and result in cost savings (proposed funding DNR – federal stimulus).
  - Shut off 90 of 99 wall pack lights (250 watt). This didn't affect visibility at night and resulted in electrical cost savings (maintenance in house project).
  - All exterior lighting will be replaced with LED style lighting.
  - Radio system was upgraded November 28, 2012.

- b. What capital improvement projects do you foresee at this facility over the next six years?
  1. *Del-Norte security system for fences and gates, upgrade or replace*
  2. *New key system*
  3. *Clean and paint water tower*
  4. *MicroLite lighting system, upgrade or replace*
  5. *Institutional Parking lot, overlay, seal and stripe*
  6. *Asphalt front gravel parking lot*
  7. *Increase the width of the Perimeter road by approximately (5) five feet (Asphalt)*
  8. *Widen and lengthen asphalt turning area, used by tractor trailers, for warehouse and MVE deliveries*
- c. How critical do you believe those projects are to the long-term sustainability of this facility?  
*The first five improvements are listed as high priority and involve safety, security, and equipment to enhance our energy saving capabilities.*

## 2. Staffing:

- a. Do you have any critical staff shortages?  
*No, due to departmental recruitment efforts, we have not had any staff shortages.*
- b. What is your average vacancy rate for all staff and for custody staff only?  
*Approximately 21 for all staff and 11 for custody staff only.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?  
*Yes, it is difficult to keep the facility fully staffed and keep comp-time to a minimum. In addition to staff shortages, we accumulate overtime due to absenteeism, transporting offenders on out count appointments, hospital supervision and training. A weekly report is submitted by each shift that reports the number of overtime hours earned and the justification for those hours. Whenever possible, staff members who earn overtime are given an equivalent amount of time off before the end of the week to eliminate overtime accumulation.*
- d. What is the process for assigning overtime to staff?  
*When overtime is required to staff positions, volunteers are asked for first. Volunteers sign up to work overtime in advance on sign up sheets located in the airlock, in front of the Control Center. If a post cannot be filled through request for volunteers, overtime is mandated utilizing seniority list broken down by shift and rank (CO I's, CO II's) with the lowest seniority to the highest. When a staff member works overtime, they are moved from the top of the list to the bottom (to qualify, staff has to work at least two or more hours in order to qualify and be moved from the top of the list). Staff may volunteer at any time to work overtime, to move their name down on the list. The seniority list is posted on the staff bulletin board next to radio and key issue, which is accessible to staff 24 hours a day, 7 days a week. The list is updated daily by the shift timekeepers.*
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?  
*Approximately 55% of the comp-time accrued at WERDCC is utilized by staff as time off and approximately 45% is paid-off.*
- f. Is staff able to utilize accrued comp-time when they choose?  
*Yes, if staffing permits.*

## 3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?  
*475 (32%) of inmate students at this institution are currently enrolled in school with the Department of Corrections' Education Department and Van-Far School District.*
- b. How many (and %) of inmate students earn their GED each year in this institution?

*On average, 110 (25%) of inmate students earn their GED each year at WERDCC.*

- c. What are some of the problems faced by offenders who enroll in education programs?  
*One problem faced by offenders who enroll in education programs is attempting to coordinate school with the other classes and programs that the offenders either participate in voluntarily or are mandated to participate. Low self-esteem of the offender is an issue. If they believe they are capable, they will progress. Many of the offenders are low achievers and simply do not want or care about their education and view having to attend school as a form of punishment.*

#### **4. Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?  
*Substance Abuse treatment is provided by Gateway Foundation, a contracted agency. We provide group therapy, individual sessions, educational lectures, educational videos and peer groups.*
- b. How many beds are allocated to those programs?  
*A total of 240 beds are allocated to the Treatment Program: 90 Long Term (includes year long offenders and 6 month offenders) and 150 Short Term (ITC, 120 Treatment, PV84).*
- c. How many offenders do those programs serve each year?  
*In FY10 approximately 987 clients were served.*
- d. What percent of offenders successfully complete those programs?  
*93.3% were successfully discharged from the program.*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?  
*A primary challenge is working our program around the institution's schedule: canteen, count, med-line, and various and assorted other activities that can interfere with a daily schedule. These things are unavoidable, however, and we have adjusted. The Department of Corrections and Gateway work together to provide a continuation of services.*

*Another challenge is space. We offer many valuable services to include Impact of Crime on Victims, GED classes, Parents as Teachers, in addition to treatment services, making it a challenge to find space for the many necessary programs. We have managed to work it out, however. Again, the Department of Corrections works with us to make it happen.*

*The offender's ability to sign out at will after being stipulated to treatment is a challenge. This decreases their motivation to participate in and successfully complete the program.*

#### **5. Vocational Programs:**

- a. What types of vocational education programs are offered at this institution?  
*Professional Gardening, Building Trades, Business Technology, Cosmetology, Certified Nurses Aide.*
- b. How many offenders (and %) participate in these programs each year?  
*Vocational Education served 227 offenders this year.*
- c. Do the programs lead to the award of a certificate?  
*All five classes lead to a completion certificate and Department of Labor certificate. Cosmetology can also lead to a State Cosmetology License if the offender passes the state board examination. Certified Nurses Aide can also lead to a license if the offender qualifies for the work release program. Business Technology students can also earn a Microsoft Office certificate in either Word, Excel, Power Point or Access. Building Trades students can earn a NCCER certificate.*
- d. Do you offer any training related to computer skills?

*Yes, Business Technology is a computer-based course teaching secretarial type skills. All classes have computers in the room where offenders have access to typing skills and other limited skills on computers (such as data entry).*

**6. Missouri Vocational Enterprises:**

- a. What products are manufactured at this institution?  
*Lab coats, hospital scrubs (tops and bottoms), visiting room jackets, broadcloth pajamas (men's and women's), mumu gowns, hospital gowns, seersucker robes with snaps, fleece robes with ties, t-shirts (with or without pockets, short sleeve, long sleeve and sleeveless), jersey shorts, twill shorts, jersey lounge pants, fleece jackets, fleece pants, sweatshirts, sweatpants, thermal tops, thermal pants (men's and women's), twill work pants, inmate work pants, inmate work shirts, sport shirts, work shirts, dress shirts, kitchen towels, terry bath towels, washcloths, bed sheets (flat and fitted), pillowcases, fleece blankets, thermal blankets, suicide vests, garment hangers, canteen bags with pocket, mesh hygiene bags and screen printing.*
- b. How many (and %) of offenders work for MVE at this site?  
*We have a budget that allows 150 offenders to be employed for MVE, which would be 9.1% of the population; however, we currently have 120 offenders employed for MVE, which would be 7.3% of the population.*
- c. Who are the customers for those products?  
*State institutions, including offender canteen; any tax exempt entity, such as hospitals, churches and schools; and state employees.*
- d. What skills are the offenders gaining to help them when released back to the community?  
*We teach all sewing skills required in the manufacture of clothing and related products including needle changes, preventative maintenance and minor repair of machines. In addition, their exposure to this workplace will afford a smooth transition in the community workplace. Offenders learn accepted practices that will allow them to interact more easily when employed in the community. Offenders are awarded certificates as they meet the 2,000-hour requirements and are recognized by the Department of Labor when they accumulate 4,000-6,000 hours.*

**7. Medical Health Services:**

- a. Is the facility accredited by the National Commission on Correctional Health Care?  
*Yes.*
- b. How many offenders are seen in chronic care clinics?  
*We have 1,229 offenders enrolled in a chronic care clinic; 139 were seen last month for routine chronic care visits.*
- c. What are some examples of common medical conditions seen in the medical unit?  
*Sinus complaints, common cold, headaches, toothaches, menstrual cramps.*
- d. What are you doing to provide health education to offenders?  
*Educational pamphlets are available in the medical unit; educational tapes of various subjects are aired on the offender television monthly; various bulletin boards in the medical unit are rotated with educational topics related to current trends; we hold an annual health fair for the offenders and one-on-one instructions are provided; prior to release, offenders with complicated conditions receive one-on-one counseling and assistance setting up appropriate appointments in the community.*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?  
*No active cases of TB have been identified in the facility.*
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.

*No, we have not noticed an increase in care due to aging of the population.*

**8. Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?

*There are multiple ways for offenders to access mental health services.*

- *At the time of entry into the institution, a comprehensive mental health evaluation is completed. At this time, if there is an underlying or previously identified mental health need, the offender is referred to the psychiatrist and admitted to chronic care clinic.*
- *Offenders are provided orientation to the Medical Service Request system, which provides them the ability to self-refer should they feel they require mental health services.*
- *All institutional staff is encouraged to be aware of behaviors and statements made by offenders and to refer offenders to mental health for screening and potential ongoing services if indicated.*
- *Daily presence and weekly rounds on segregation often identifies offenders who are experiencing various difficulties and could benefit from mental health services.*

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

*There were no successful suicides (0%) occurring at WERDCC in the past year. Suicide prevention instruction is given to all staff by Mental Health through Core Training. All offenders are screened for any signs of suicidality by the Receiving Nurse at entry and again by a Qualified Mental Health Practitioner that same day or the next day. Offenders are again screened for suicidality through chronic care visits or through Medical Service Requests or staff referral.*

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

*Approximately 590 offenders are taking psychotropic medications for mental illness, which is approximately 36% of our offender population.*

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

*Approximately 500 offenders are in chronic care. They are offered residential psychiatric care through the Women's Social Rehabilitation Unit, medication management by one of our psychiatrist with routine visits, routine chronic care visits with a licensed mental health professional, psycho-educational groups, individual psychotherapy, group psychotherapy, crisis intervention, treatment planning by a multidisciplinary treatment planning team and discharge planning for reentry to their community at release.*

9. What is your greatest challenge in managing this institution?

*The greatest challenge I currently face is with the anticipation of managerial staff soon to retire and the uncertainty that creates, as well as the knowledge and experience lost by their departure. I would also add the challenges of managing compensatory time, hiring and retaining quality employees and maintaining good staff morale for employees who do not receive adequate pay.*

10. What is your greatest asset to assist you in managing this institution?

*Just as managing staff is one of the greatest challenges, they are also, without a doubt the most valuable asset. The teamwork exhibited by staff and Executive support are invaluable.*

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

*This facility has twenty (20) vehicles in its fleet.*

*One (1) of the 15-passenger vans is a 1998 model year vehicle with over 200,000 miles.*

*One (1) of the 15-passenger vans is a 1999 model with over 170,000 miles.*

*One (1) of the 15-passenger vans is a 2005 model with over 160,000 miles.*

*There are ten (10) vehicles in the fleet that are model year 2006 or newer; all with mileage below 85,000 miles.*

*We have two (2) vehicle patrol cars with mileage of 230,000 and 180,000.*

*We have four (4) maintenance trucks with mileage below 36,000 and range in model years 1994 to 1998.*

*This facility has three 15-passenger vans in need of replacement due to high mileage, age and major components wearing out. These vans are highly important to the facility because they are in rotation with one van on the road every business day accumulating two hundred mile round trips delivering bus releases and inter-office mail. The two vehicle patrol cars will need replacement within the next 12 months due to the fact that they average an accumulation of 3,500 miles each month.*

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

*At this time I believe the morale to be medium. The morale runs like a barometer, high, medium and low. It depends on how things are going with the job, other staff and at home. Overall I think it averages medium. Things that make it run low include, but are not limited to, staff shortages (currently 17 Custody staff short), news of no raises, higher insurance rates, no overtime, too much overtime, high gas prices, absenteeism, etc. I hear conflicting responses from staff when I ask them if they think morale is high or low. Some say high, some say low and some say medium.*

*The Gender Informed Practice Assessment team, who completed a survey in 2010 with a cross-section of our staff, said the morale is high with examples cited by staff as fundraisers for other staff, helping other staff when things go bad for them, staff believing in the programs, staff appreciating Administration coming out among them and visiting with them daily, open lines of communication, etc. We are still doing these things to the best of our ability. This committee visited with staff members that were selected at random from all three shifts and visited with them in an environment where there were no supervisors or any fear of retaliation. This would indicate the result of their survey is accurate; however day to day changes can make a big difference in the level of morale.*

*Upon my daily visits I find that staff seems to be happy with their jobs and with the way things are going generally, but I don't see the morale as being above average or below average at this time.*

13. **Caseworkers:**

A. How many caseworkers are assigned to this institution?

*We have 2 Corrections Classification Assistants, 32 Corrections Case Managers I/II, and 1 Corrections Case Manager III.*

B. Do you currently have any caseworker vacancies?

*We currently have one Corrections Case Manager I/II vacancy, which will be filled soon.*

C. Do the caseworkers accumulate comp-time?

*Case managers do accumulate compensatory time on occasion when they are called to work beyond their regular working hours due to Critical Illness/Death Notice, Division of Family Services call, attorney call or other offender crises. In some cases, they are called upon to assist the Corrections Emergency Response Team in special security searches. There are also case managers who facilitate the Impact of Crime on Victims classes, which are held on weekends.*

- D. Do the caseworkers at this institution work alternative schedules?

*Yes, many case managers now work four, ten-hour days instead of five, eight-hour days.*

- E. How do inmates gain access to meet with caseworkers?

*Offenders may gain access to meet with case managers through daily open door hours, wing walks, general appointments, offender correspondence, teaming violations, Transitional Accountability Plan meetings, counseling and making referrals to Mental Health and Medical.*

- F. Average caseload size per caseworker?

*75.*

- # of disciplinary hearings per month?

*22*

- # of IRR's and grievances per month?

*4*

- # of transfers written per month?

*5*

- # of re-classification analysis (RCA's) per month?

*11*

- G. Are there any services that you believe caseworkers should be providing, but are not providing?

*Our staff are providing all necessary services at this time. Currently, classification staff conduct programs on Impact of Crime on Victims, Pathway to Change and Anger Management. Other duties assigned to classification staff, but not limited to, are custody support, conducting searches, investigations and counseling.*

- H. If so, what are the barriers that prevent caseworkers from delivering these services?

*Not applicable.*

- I. What type of inmate programs/classes are the caseworkers at this institution involved in?

*Pathway to Change, Impact of Crime on Victims Classes, Anger Management, Restorative Justice, Pre-Release, Canine Helpers Allow More Possibilities, Women's Social Rehabilitation Unit, Peer Action Care Team, Project Reach, Hospice, Beauty for Ashes and Food Service Incentive.*

- J. What other duties are assigned to caseworkers at this institution?

*Job coordinator, processing visiting applications, key management, counseling offenders, criminal histories, offender payroll, death notices, Transition Accountability Plans, work release applications, investigations, organize room moves, file audits, notary service, bed assignments, vendor orders, court returns processed, facilitate outside phone calls with Department of Family Services and attorneys, supply requests, mental health referrals, medical referrals, chaplain referrals, escorting visitors for programs/classes, 4-H Life Program and other duties as assigned.*

#### **14. Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution?

*We have 11 Institutional Parole Officers, 1 Unit Supervisor, 1 District Administrator and 3 Office Support Assistants (Keyboarding).*

- B. Do you currently have any staff shortages?

*No. We do have a new position that we will interview for on November 28, 2012; Senior Office Support Assistant (Keyboarding).*

- C. Do the parole officers accumulate comp-time?

*No. At the current time, we have enough coverage and staff is allowed to utilize compensatory time as they acquire it.*

- D. Do the parole officers at this institution flex their time, work alternative schedules?

*Yes, they are encouraged to flex their time in order to not accumulate excessive compensatory time.*

- E. How do inmates gain access to meet with parole officers?

*Offenders submit correspondence to the Institutional Parole Officer in their housing unit and, as time permits, the Institutional Parole Officers have open door meetings. The general population units try to have two open door sessions per week. Also, the Institutional Parole Officers schedule appointments and call the offenders out to interview them for necessary reports prior to due dates. This is done automatically on the part of the parole officer. During the R&O orientation, two parole officers alternated talking to the offenders during an open forum type setting and go over probation and parole rules. A packet of information is handed out to each offender during receiving that covers probation and parole issues and who to contact with questions.*

- F. Average caseload size per parole officer?

*For the general population parole officers, their caseload is the whole housing unit, averaging around 256 offenders. The specialized caseloads, treatment and violator units are less, but still average around 175 to 200 offenders.*

- # of pre-parole hearing reports per month?

*A total of approximately 90 per month.*

- # of community placement reports per month?

*A total of approximately 15 per month, which includes proceed with release memos.*

- # of investigation requests per month?

*Approximately 130 per month.*

- G. Are there any services that you believe parole officers should be providing, but are not providing?

*The parole officers at WERDCC are not participating that much in programs or classes at the present time. Our main focus is on providing a high volume of reports to the Courts and Board, which mainly consumes our time. It would be nice if we could be more involved in Pathway to Change and pre-release programs.*

- H. If so, what are the barriers that prevent officers from delivering these services?

*At the present time, our adjusted average work units per officer is 201 when the average should be 173 work hours per officer. We have a high volume of reports that are due to the Courts and Board with time sensitive due dates.*

- I. What type of inmate programs/classes are the parole officers at this institution involved in?

*The two parole officers in the treatment unit work with classification staff and outside field officers to assign offenders to aftercare in the St. Louis and Kansas City areas. The offenders attend a vide conference via satellite to learn more about the Alt-Care program they will attend upon release.*

14. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

*N/A.*

16. Does your institution have saturation housing? If so, how many beds?

*Yes, approximately 100 beds.*

**17. Radio/Battery Needs:**

- a. What is the number of radios in working condition?

*We began using new Kenwood radios on November 28, 2012; we have 283 new radios.*



- b. Do you have an adequate supply of batteries with a good life expectancy?  
*Yes, we have 566 new batteries.*
- c. Are the conditioners/rechargers in good working order?  
*Yes.*